

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Reno		NE $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$		8		T 23 S		R 5 EW	
Distance and direction from nearest town or city street address of well if located within city? 1525 E. 17th Avenue, Hutchinson, Kansas									
2 WATER WELL OWNER: Kwik Shop, Inc.									
RR#, St. Address, Box # : 734 E. 4th Avenue									
City, State, ZIP Code : Hutchinson, Kansas 67504									
Board of Agriculture, Division of Water Resources Application Number:									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 25.0 ft. ELEVATION: _____							
		Depth(s) Groundwater Encountered 1 12.5 ft. 2 _____ ft. 3 _____ ft.							
		WELL'S STATIC WATER LEVEL 15.42 ft. below land surface measured on mo/day/yr 10/11/04							
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm							
		Est. Yield NA gpm Well water was _____ ft. after _____ hours pumping _____ gpm							
		Bore Hole Diameter 8.5 in. to 25.0 ft. and _____ in. to _____ ft.							
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well									
1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)									
2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well									
Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____ If yes, mo/day/yr sample was submitted _____									
Water Well Disinfected? Yes _____ No X									
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____									
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____									
7 Fiberglass _____ Threaded X									
Blank casing diameter 2.375 in. to 10.0 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Casing height above land surface Flush Mount in., weight _____ lbs./ft. Wall thickness or gauge No. Schedule 40									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement									
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify)									
3 Mill slot 9 ABS 12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)									
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 10 Other (specify)									
7 Torch cut									
SCREEN-PERFORATED INTERVALS: From 25.0 ft. to 10.0 ft. From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From 25.0 ft. to 4.5 ft. From _____ ft. to _____ ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other									
Grout Intervals From 0.0 ft. to 1.5 ft. From 1.5 ft. to 4.5 ft. From _____ ft. to _____ ft.									
What is the nearest source of possible contamination:									
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well									
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage (former) 15 Oil well/ Gas well									
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)									
13 Insecticide storage									
Direction from well? East How many feet? 5									
FROM		TO		CODE		LITHOLOGIC LOG			
0.0		0.8				Asphalt/Concrete			
0.8		13.0				Red brown sandy, very silty clay, laminated, firm, moist			
13.0		25.0				Red brown very fine-coarse grained sand, silt and clay lenses 14-16', moist, wet @13'			
RECEIVED									
NOV 17 2004									
BUREAU OF WATER									
Flush-mount well completion approved by Don Taylor, KDHE, BOW.									
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) 10/07/04 and this record is true to the best of my knowledge and belief Kansas									
Water Well Contractor's License No. 692 This Water Well Record was completed on (mo/day/yr) 11/15/04									
under the business name of Quad State Services, Inc. by (signature) _____									