

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <u>Stafford</u>		<u>NE 1/4 NE 1/4 NE 1/4</u>		<u>5</u>		<u>T 24 S</u>		<u>R 13 E</u>	
Distance and direction from nearest town or city street address of well if located within city?									
<u>100 feet South of First St. on West side of West St., St. John, Kansas</u>									
2 WATER WELL OWNER: <u>St. Johns Farmers Coop</u>									
RR#, St. Address, Box # : <u>312 W. First</u>									
City, State, ZIP Code : <u>St. John, Kansas 67576</u>									
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: <u>30</u> ft. ELEVATION:									
Depth(s) Groundwater Encountered 1. <u>18</u> ft. 2. ft. 3. ft.									
WELL'S STATIC WATER LEVEL <u>17.87</u> ft. TOC measured on mo/day/yr									
Pump test data: Well water was ft. after hours pumping gpm									
Est. Yield gpm: Well water was ft. after hours pumping gpm									
Bore Hole Diameter <u>8</u> in. to ft. and in. to ft.									
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well									
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)									
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well									
Was a chemical/bacteriological sample submitted to Department? Yes.....No <u>X</u>; If yes, mo/day/yr sample was submitted									
Water Well Disinfected? Yes No <u>X</u>									
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 <u>X</u>									
Blank casing diameter <u>2</u> in. to <u>15</u> ft. Dia in. to ft. Dia in. to ft.									
Casing height above land surface <u>0</u> in., weight lbs./ft. Wall thickness or gauge No.									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement									
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify)									
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									
7 Torch cut 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From <u>15</u> ft. to <u>30</u> ft. From ft. to ft.									
From ft. to ft. From ft. to ft.									
GRAVEL PACK INTERVALS: From <u>14</u> ft. to <u>30</u> ft. From ft. to ft.									
From ft. to ft. From ft. to ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other									
Grout Intervals: From <u>0</u> ft. to <u>12</u> ft. From <u>12</u> ft. to <u>14</u> 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 15 Oil well/Gas well									
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)									
13 Insecticide storage UST									
Direction from well? <u>Northeast</u> How many feet? <u>90</u>									
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
0 6 Brown, silt									
6 10 Fine to medium sand									
10 20 Fine to coarse sand									
20 30 Fine to medium sand									
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/year) <u>06-02-94</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>527</u> This Water Well Record was completed on (mo/day/yr) <u>11-14-94</u> under the business name of <u>GebCore Services, Inc.</u> by (signature) <u>Don Taylor</u>									
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									