

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Finney		SW ¼ SW ¼ NW ¼		6		T 24 S		R 32 E W	
Distance and direction from nearest town or city street address of well if located within city? .5 North of Garden City									
2 WATER WELL OWNER: Dan Crist									
RR#, St. Address, Box # : 8th St									
City, State, ZIP Code : Garden City Ks 67846									
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 320 ft. ELEVATION:						
			Depth(s) Groundwater Encountered 1 180 ft. 2 _____ ft. 3 _____ ft.						
			WELL'S STATIC WATER LEVEL 180 ft. below land surface measured on mo/day/yr 8/18/04						
			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 10 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 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 X No _____ If yes, mo/day/yr sample was submitted									
Water Well Disinfected? Yes X No _____									
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 Eagle Loc Threaded _____									
Blank casing diameter 5 in. to 320 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.									
Casing height above land surface 12 in., weight _____ lbs./ft. Wall thickness or gauge No. SDR 21									
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 185 ft. to 205 ft. From 225 ft. to 245 ft.									
From 285 ft. to 305 ft. From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From 25 ft. to 320 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 5 ft. to 25 ft. From 175 ft. to 185 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 Non observed									
Direction from well? _____ How many feet? _____									
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS			
0	22		Top soil & brown clay						
22	35		Sand & gravel						
35	78		Brown clay						
78	80		sand						
80	120		Brown clay						
120	170		Sand & gravel						
170	180		Brown clay						
180	208		Sand & gravel						
208	227		Brown sandy clay						
227	296		Sand & cemented sand ;cl. stks						
296	300		Brown clay						
300	311		Med sand						
311	320		Clay & shale						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was Constructed									
completed on (mo/day/yr) 8/18/04 and this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's License No. 473 This Water Well Record was completed on (mo/day/yr) 8/19/04									
under the business name of Tyler Water Well Inc. by (signature) <i>[Signature]</i>									
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send 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.									

OFFICE USE ONLY

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