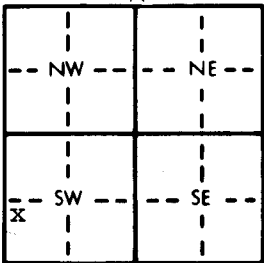


1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Finney	NW ¼ SW ¼ SW ¼	12	T 24 S	R 33 EW

Distance and direction from nearest town or city street address of well if located within city?

½ West of Garden City on Hwy. 50, ½ South

2 WATER WELL OWNER: Werner Minnis	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # : P. O. Box 236	Application Number:
City, State, ZIP Code : Garden City, Kansas 67846	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>242</u> ft. ELEVATION:
	Depth(s) Groundwater Encountered 1. <u>66</u> ft. 2. _____ ft. 3. _____ ft.
	WELL'S STATIC WATER LEVEL <u>66</u> ft. below land surface 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>10</u> in. to <u>242</u> ft., and _____ in. to _____ ft.
	WELL WATER TO BE USED AS:
	<input checked="" type="checkbox"/> 1 Domestic <input type="checkbox"/> 3 Feedlot <input type="checkbox"/> 6 Oil field water supply <input type="checkbox"/> 9 Dewatering <input type="checkbox"/> 12 Other (Specify below)
	<input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 4 Industrial <input type="checkbox"/> 7 Lawn and garden only <input type="checkbox"/> 10 Observation well
	Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____
	Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
<input type="checkbox"/> 1 Steel <input type="checkbox"/> 3 RMP (SR)	<input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 9 Other (specify below)	Welded _____
<input checked="" type="checkbox"/> 2 PVC <input type="checkbox"/> 4 ABS	<input type="checkbox"/> 7 Fiberglass		Threaded _____
Blank casing diameter <u>5</u> in. to <u>222</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.			
Casing height above land surface <u>12</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>200 psi</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:	<input checked="" type="checkbox"/> 7 PVC	<input type="checkbox"/> 10 Asbestos-cement	
<input type="checkbox"/> 1 Steel <input type="checkbox"/> 3 Stainless steel <input type="checkbox"/> 5 Fiberglass <input type="checkbox"/> 8 RMP (SR)	<input type="checkbox"/> 11 Other (specify) _____		
<input type="checkbox"/> 2 Brass <input type="checkbox"/> 4 Galvanized steel <input type="checkbox"/> 6 Concrete tile <input type="checkbox"/> 9 ABS	<input type="checkbox"/> 12 None used (open hole)		
SCREEN OR PERFORATION OPENINGS ARE:	<input type="checkbox"/> 5 Gauzed wrapped <input checked="" type="checkbox"/> 8 Saw cut <input type="checkbox"/> 11 None (open hole)		
<input type="checkbox"/> 1 Continuous slot <input type="checkbox"/> 3 Mill slot <input type="checkbox"/> 6 Wire wrapped <input type="checkbox"/> 9 Drilled holes	<input type="checkbox"/> 7 Torch cut <input type="checkbox"/> 10 Other (specify) _____		
<input type="checkbox"/> 2 Louvered shutter <input type="checkbox"/> 4 Key punched			
SCREEN-PERFORATED INTERVALS: From <u>222</u> ft. to <u>242</u> ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From <u>16</u> ft. to <u>242</u> ft., From _____ ft. to _____ ft.			

6 GROUT MATERIAL:	<input type="checkbox"/> 1 Neat cement	<input type="checkbox"/> 2 Cement grout	<input checked="" type="checkbox"/> 3 Bentonite	<input type="checkbox"/> 4 Other _____
Grout Intervals: From <u>6</u> ft. to <u>16</u> ft., From _____ ft. to _____ ft.				
What is the nearest source of possible contamination:	<input type="checkbox"/> 1 Septic tank <input type="checkbox"/> 4 Lateral lines <input type="checkbox"/> 7 Pit privy <input type="checkbox"/> 10 Livestock pens <input type="checkbox"/> 14 Abandoned water well			
<input type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 5 Cess pool <input type="checkbox"/> 8 Sewage lagoon <input type="checkbox"/> 11 Fuel storage <input type="checkbox"/> 15 Oil well/Gas well				
<input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 9 Feedyard <input type="checkbox"/> 12 Fertilizer storage <input type="checkbox"/> 16 Other (specify below)				
				Unknown

Direction from well?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	4	Surface			
4	20	Sand & gravel			
20	40	Sand & gravel with rocks			
40	60	Sand & gravel with lots of rock			
60	80	Little sand with clay			
80	100	Clay			
100	160	Sticky clay			
160	180	Clay & gravel mixed			
180	200	Sand & gravel with little clay			
200	220	Clay with little gravel			
220	240	Clay, sand & gravel			
240	260	Clay with little rock			
260	280	Clay & rock			
280	300	Clay with one streak of fine sand			
300	320	Blue clay & rock, shale at 314'			

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>February 9, 1982</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>102</u> This Water Well Record was completed on (mo/day/yr) <u>March 12, 1982</u> under the business name of <u>Layne-Western Company, Inc.</u> by (signature) <u>[Signature]</u>
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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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.