

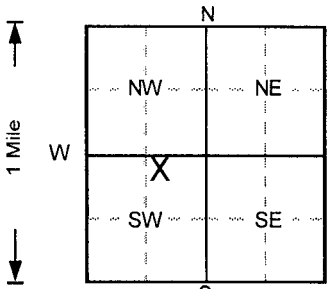
1	LOCATION OF WATER WELL: County: Kearny	Fraction NW 1/4 NE 1/4 SW 1/4	Section Number 11	Township Number T 24 S	Range Number R 35 E/W
---	--	---	-----------------------------	----------------------------------	---------------------------------

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

103 E. 6th, Deerfield

2	WATER WELL OWNER: Garden City Coop Inc. RR#, St. Address, Box # : P.O. Box 838 City, State, ZIP Code : Garden City, Kansas 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 **26** ft. ELEVATION:

Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr

Pump test data: Well water was **NA** ft. after hours pumping gpm

Est. Yield **NA** gpm: Well water was ft. after hours pumping gpm

Bore Hole Diameter **8** in. to **26** 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 **Air sparge**

Was a chemical/bacteriological sample submitted to Department? Yes No ; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes 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 Threaded.

Blank casing diameter **2** in. to **24** ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface **0** in., weight lbs./ft. Wall thickness or gauge No. **Sch. 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)

6 Concrete tile 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

7 Torch cut 10 Other (specify)

SCREEN-PERFORATED INTERVALS: From **24** ft. to **26** ft., From ft. to ft.

From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From **21** ft. to **26** 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 **Concrete**

Grout Intervals: From **0** ft. to **1** ft., From **1** ft. to **24** 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 **Former UST basin**

Direction from well? **within excavated area**

How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	4	Clay, sl. silty, moist, plastic, Brown			
4	16	Sand (vf-c), subrounded, Lt. Brown			
16	21	Sand (vf-m), v. silty, sl. clayey, Dark Gray			
21	23	Sand (vf-c), gravel (f-vc) (3"), Dark Gray			
23	26	Sand (vf-m), v. clayey, silty, Lt. Brown			

AS1, Tag # 00363015, Flushmount
 Project Name: GF - Garden City Coop - Deerfield
 GeoCore # 1173, KDHE # U1 047 00585

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) **4/6/2005** and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. **527** This Water Well Record was completed on (mo/day/yr) **4/11/2005** under the business name of **GeoCore, Inc.** by (signature) *Dale Kelly*

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.