

|                            |  |   |                             |                                  |                                 |
|----------------------------|--|---|-----------------------------|----------------------------------|---------------------------------|
| 1] LOCATION OF WATER WELL: |  | Fraction<br><b>NE 1/4 SW 1/4 SW 1/4</b> | Section Number<br><b>18</b> | Township Number<br><b>T 26 S</b> | Range Number<br><b>R 30 E/W</b> |
|----------------------------|--|---|-----------------------------|----------------------------------|---------------------------------|

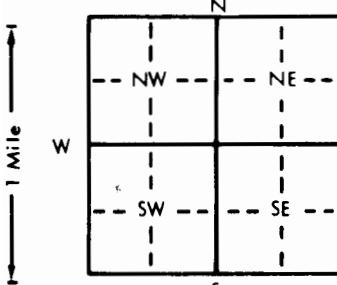
Distance and direction from nearest town or city street address of well if located within city?  
**1 mile east hwy 50 from pierceville**

2] WATER WELL OWNER:  
**TOM BEAVERS**

RR#, St. Address, Box # :  
**GARDEN CITY K, 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..... <b>198</b> ft. ELEVATION: .....   |
| Depth(s) Groundwater Encountered 1..... ft. 2..... ft. 3..... ft.   |
| WELL'S STATIC WATER LEVEL <b>52</b> ft. below land surface measured on mo/day/yr <b>5-20-90</b>                       |
| 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 <b>978</b> in. to <b>178</b> 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..... If yes, mo/day/yr sample was submitted |
| Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                           |

5] TYPE OF BLANK CASING USED:

1 Steel 3 RMP (SR)  
**2 PVC** 4 ABS

5 Wrought iron

6 Asbestos-Cement  
**7 Fiberglass**

8 Concrete tile

9 Other (specify below)

CASING JOINTS: Glued  Clamped

Welded

Threaded

Blank casing diameter ..... in. to **158** ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface ..... **20** in., weight ..... **250** 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) ..... |

SCREEN OR PERFORATION OPENINGS ARE:

|                                      |                  |                 |                     |
|--------------------------------------|------------------|-----------------|---------------------|
| 1 Continuous slot <b>3 Mill slot</b> | 5 Gauzed wrapped | 8 Saw cut       | 11 None (open hole) |
| 2 Louvered shutter 4 Key punched     | 6 Wire wrapped   | 9 Drilled holes |                     |

SCREEN-PERFORATED INTERVALS: From ..... **158** ft. to ..... **198** ft., From ..... ft. to ..... ft.

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

GRAVEL PACK INTERVALS: From ..... **150** ft. to ..... **198** 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 ..... **4** ft. to ..... **150** ft., From ..... ft. to ..... 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) |

Direction from well?

|      |    |                |      |    |                    |
|------|----|----------------|------|----|--------------------|
| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|----|----------------|------|----|--------------------|

|            |            |                                    |
|------------|------------|------------------------------------|
| <b>0</b>   | <b>6</b>   | <b>TOP SOIL</b>                    |
| <b>6</b>   | <b>38</b>  | <b>BROWN SANDY CLAY</b>            |
| <b>38</b>  | <b>50</b>  | <b>COURSE GRAVEL</b>               |
| <b>50</b>  | <b>70</b>  | <b>BROWN SANDY CLAY</b>            |
| <b>70</b>  | <b>76</b>  | <b>FINE TO MED SAND</b>            |
| <b>70</b>  | <b>117</b> | <b>BROWN SANDY CLAY</b>            |
| <b>117</b> | <b>128</b> | <b>FINE TO MED SAND AND GRAVEL</b> |
| <b>128</b> | <b>160</b> | <b>BROWN SANDY CLAY</b>            |
| <b>160</b> | <b>178</b> | <b>FINE TO MED SAND AND GRAVEL</b> |

7] CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was  constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **4-25-90** and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. **172** This Water Well Record was completed on (mo/day/yr) **8-90** by (signature) **TONI HATN DRILLING**

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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.