

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Sedgwick		NW 1/4 NW 1/4 NE 1/4		18		T 28 S		R 1 E	
Distance and direction from nearest town or city street address of well if located within city?									
11023 W. 39th Street; Schulte, Kansas									
2 WATER WELL OWNER: Crossroads Feed & Fuel									
RR#, St. Address, Box # : 23500 W. 119th Street South					Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : Conway Springs, Kansas 67301					Application Number:				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:									
4 DEPTH OF COMPLETED WELL 35 ft. ELEVATION: 1330.73									
Depth(s) Groundwater Encountered 1. 20 ft. 2. ft. 3. ft.									
WELL'S STATIC WATER LEVEL 17.62 ft. below land surface measured on mo/day/yr 6/1/98									
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 37 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 No									
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Casing Joints: Glued Clamped									
2 PVC 4 ABS 7 Fiberglass Threaded									
Blank casing diameter 2 in. to 15 ft. Dia in. to ft. Dia in. to ft.									
Casing height above land surface -5.04 in. weight Sch. 40 lbs./ft. Wall thickness or gauge No.									
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 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 15 ft. to 35 ft. From ft. to ft.									
From ft. to ft. From ft. to ft.									
GRAVEL PACK INTERVALS: From 13 ft. to 37 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 0 ft. to 11 ft. From 11 ft. to 13 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? West How many feet? 200									
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
0 2 Clay, Dark Brown									
2 9 Clay, Red Brown									
9 18 Clay, Medium Brown									
18 20 Clay, Light Brown									
20 22 Clay, Tan									
22 25 Sand,									
25 36 Sand, Tan/Bluff									
36 37 Shale, Gray									
XR-8B, Tag # 00261058, Flushmount									
Project Name: Crossroads Feed -Fuel									
GeoCore # 594, KDHE # U2 087 393									
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) 5/28/98 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) 6/19/98									
under the business name of GeoCore Services, Inc. by (signature) Bob & Bob									
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.									