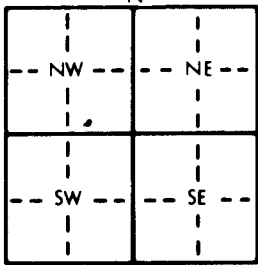


1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>SEDGWICK</u>		<u>SW 1/4 SE 1/4 NW 1/4</u>	<u>8</u>	<u>T 28 S</u>	<u>R 4 E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>101 SOUTH ADAMS, CHENEY, KS</u>					
2 WATER WELL OWNER:		MW #8			
RR#, St. Address, Box # :		Board of Agriculture, Division of Water Resources			
City, State, ZIP Code :		Application Number:			
<u>CHENEY, KS 67025</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>36</u> ft. ELEVATION: <u>19.79</u> ft.			
		Depth(s) Groundwater Encountered 1. <u>19.79</u> ft. 2. <u>19.79</u> ft. 3. <u>19.79</u> ft.			
		WELL'S STATIC WATER LEVEL <u>19.79</u> ft. below land surface measured on mo/day/yr <u>8/24/00</u>			
		Pump test data: Well water was <u>25</u> gpm. Well water was <u>37</u> ft. after <u>8</u> hours pumping <u>25</u> gpm.			
		Bore Hole Diameter <u>12 1/4</u> in. to <u>37</u> ft. and <u>37</u> in. to <u>37</u> ft.			
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well			
		☒ 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 <u> </u> No <u> </u> If yes, mo/day/yr sample was sub-			
		mitted			
		Water Well Disinfected? Yes <u> </u> No <u> </u>			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <u> </u> Clamped <u> </u>			
1 Steel 3 RMP (SR)		5 Wrought iron 8 Concrete tile			
2 PVC 4 ABS		6 Asbestos-Cement 9 Other (specify below)			
Blank casing diameter <u>5.625</u> in. to <u>26</u> ft. Dia. <u>26</u> in. to <u>26</u> ft. Dia. <u>26</u> in. to <u>26</u> ft.		7 Fiberglass			
Casing height above land surface <u>24</u> in. weight <u>2.79</u> lbs./ft. Wall thickness or gauge No. <u>SC4 40</u>		8 RMP (SR)			
TYPE OF SCREEN OR PERFORATION MATERIAL:		10 Asbestos-cement			
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR)		11 Other (specify)			
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS		12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped 8 Saw cut 11 None (open hole)			
1 Continuous slot <u>Mill slot</u> 6 Wire wrapped 9 Drilled holes		10 Other (specify)			
2 Louvered shutter 4 Key punched 7 Torch cut					
SCREEN-PERFORATED INTERVALS: From <u>26</u> ft. to <u>36</u> ft. From <u>26</u> ft. to <u>36</u> ft.					
GRAVEL PACK INTERVALS: From <u>22.5</u> ft. to <u>37</u> ft. From <u>22.5</u> ft. to <u>37</u> ft.					
6 GROUT MATERIAL:		4 Other			
1 Neat cement 2 Cement grout <u>Bentonite</u>					
Grout intervals: From <u>2</u> ft. to <u>22.5</u> ft. From <u>2</u> ft. to <u>22.5</u> ft.					
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well			
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well		12 Fertilizer storage 16 Other (specify below)			
2 Sewer lines 5 Cess pool 8 Sewage lagoon 13 Insecticide storage <u>GRAIN ELEVATOR</u>					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard					
Direction from well? <u>200' NW OF SITE</u>		How many feet?			
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS					
0 1 TOPSOIL W/ MUCH ORGANIC MATTER					
1 3.5 SILT, REDBRN, MUCH CLAY					
3.5 4 SAND, VF-VC, MUCH SILT, REDBRN					
4 9 CLAY, W/ MUCH VF SAND, REDBRN					
9 15 SAND VF-VC, RED TAN W/ SOME CLAY STREAKS					
15 17 CLAY, REDBRN W/ SOME SAND AND MUCH WEATHERED SHALE					
17 23.5 SHALE, REDBRN, HARD, W/ GREEN - GREY INCLUSIONS, FRACTURED					
23.5 24 CLAY, RED-WHITE, SOFT					
24 37 SHALE, RED BRN, W/ GREEN - GRAY SHALE STREAKS, HARD					
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>8/19/00</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>581</u> This Water Well Record was completed on (mo/day/yr) <u>9/1/00</u> under the business name of <u>LAYNE WESTERN, A DIV. OF LAYNE CHRISTENSEN</u> by (signature) <u>Ken M. West</u>					
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.					