

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Barber		NW $\frac{1}{4}$ SE $\frac{1}{4}$ NW $\frac{1}{4}$	5	T 30 S	R 11 E <u>W</u>
Distance and direction from nearest town or city street address of well if located within city? West River Rd. and Sunflower Dr.			Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER:					
Farmers Co-op Equity Co. FCE					
RR#, St. Address, Box # Box 40					
City, State, ZIP Code Isabel, KS 67065					

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <div><div>W</div><div><div>--NW--</div><div>--NE--</div></div><div><div>--SW--</div><div>--SE--</div></div><div>S</div></div>	4 DEPTH OF COMPLETED WELL 80 ft. Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL 68.47 ft. below land surface measured on mo/day/yr. <u>10-13-06</u> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm 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 Domestic (lawn& garden) <u>10</u> Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> Sample was submitted _____ Water well disinfected? Yes _____ No <u>X</u> If yes, mo/day/yr _____
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5 TYPE OF CASING USED:		5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____	
1 Steel 3 RMP (SR)		6 Asbestos-Cement	9 Other (specify below) _____	Welded _____	
<u>2</u> PVC 4 ABS		7 Fiberglass		Threaded <u>X</u>	
Blank casing diameter <u>2</u> in. to <u>70</u> ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.					
Casing height above land surface <u>32</u> in., Weight _____ lbs./ft. Wall thickness or gauge No. <u>SCH40</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless Steel 5 Fiberglass <u>7</u> PVC 9 ABS 11 Other (Specify) _____					
2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot <u>3</u> Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)					
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____					
SCREEN-PERFORATED INTERVALS: From <u>70</u> ft. to <u>80</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>80</u> ft. to <u>66</u> ft., From _____ ft. to _____ ft.					

6 GROUT MATERIAL:		1 Neat cement	2 Cement grout	<u>3</u> Bentonite	4 Other _____
Grout Intervals: From <u>66</u> ft. to <u>2</u> 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 13 Insecticide Storage 16 Other (specify below)					
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard <u>12</u> Fertilizer Storage 15 Oil well/gas well					
Direction from well? Northwest How many feet? <u>100</u>					

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Fill	80	66	10/20 Sand
2	5	Silty clay	66	2	3/8 Bentonite chips
5	25	Tan to grey clay	2	0	Cement
25	35	Sandy tan clay			
35	51	Tan to grey clay			
51	65	Sand with clay			
65	80	Brown sandy clay			MW-01

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>10-11-06</u> and this record is true to the best of my knowledge and belief.	
Kansas Water Well Contractor's License No. <u>665</u>	This Water Well Record was completed on (mo/day/year) <u>10-20-06</u>
under the business name of Pratt Well Environmental	by (signature) <u>John E. Pratt</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, Geology Section, 1 000 SW Jackson St., Suite 420, Topeka, Kansas 66612- 1 367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdhe.state.ks.us/geo/waterwells .	