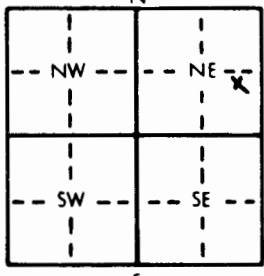


1 LOCATION OF WATER WELL: County: **SEWARD** Fraction: **NE 1/4 SE 1/4 NE 1/4** Section Number: **33** Township Number: **T 34 S** Range Number: **R 33 EW**

Distance and direction from nearest town or city street address of well if located within city?
400' N of 8th St & 150' W of County Estates Rd. MWBD 76373

2 WATER WELL OWNER: **KDHE**
 RR#, St. Address, Box #: **TOPEKA, KS** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **TOPEKA, KS** Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

 4 DEPTH OF COMPLETED WELL: **324** ft. ELEVATION: **2829.87 TOC**
 Depth(s) Groundwater Encountered: 1. **2678.75** ft. EL. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: **2678.75** ft. below land surface measured on mo/day/yr
 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: **9** in. to **324** 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 **X**; if yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes _____ No **X**

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 **X**
 Blank casing diameter: **4** in. to **175** ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.
 Casing height above land surface: **24** in., weight **2.86** lbs./ft. Wall thickness or gauge No. **Sch 80**
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 11 Other (specify) _____
 2 Brass 4 Galvanized steel 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 **175** ft. to **195** ft., From **304** ft. to **324** ft.
 From **224** ft. to **244** ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **166** ft. to **199** ft., From **218** ft. to **253** ft.
 From **294** ft. to **324** ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: **1** Neat cement 2 Cement grout **3** Bentonite 4 Other **199-218, 253-294**
 Grout intervals: From **0** ft. to **2** ft., From **2** ft. to **164** ft., From **164** ft. to **166** 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
 Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Topsoil	108	110	Clay
1	18	Sand	110	115	Caliche
18	25	Clay	115	126	Clay & sandy
25	34	Sand	126	165	Caliche
34	54	Clay w/ caliche	165	195	Sand
54	61	Sand	195	237	Clay
61	68	Clay & sand	237	263	Sand
68	73	Caliche	263	268	Clay
73	77	Sand	268	280	Sand
77	79	Caliche	280	288	Clay
79	84	Sand	288	295	Sand
84	86	Clay	295	297	Clay
86	97	Caliche	297	317	Sand seams of clay
97	107	Sand	317	324	Clay
107	118	Caliche			

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) **8-3-94** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **501** This Water Well Record was completed on (mo/day/year) **9-9-94** under the business name of **Layne, Inc.** by (signature) **Steven R. Mitchell**

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.

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