

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Morton</u>	<u>SW 1/4 SW 1/4</u>	<u>16</u>	<u>T 35 S</u>	<u>R 42 E</u>

Distance and direction from nearest town or city street address of well if located within city?

City of Elkhart

2 WATER WELL OWNER:	RR#, St. Address, Box #	Board of Agriculture, Division of Water Resources
<u>Santa Fe Well</u>	<u>Well # 4</u>	Application Number:
City, State, ZIP Code		

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>268'</u> ft. ELEVATION:
	Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL <u>237'</u> 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 in. to ft., and in. to ft. WELL WATER TO BE USED AS: <u>5 Public water supply</u> 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 <u>X</u> No

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued Clamped
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
2 PVC	4 ABS	7 Fiberglass	Welded
Blank casing diameter <u>12"</u> in. to ft., Dia in. to ft., Dia in. to ft.			Threaded
Casing height above land surface <u>Building Floor</u> in., weight lbs./ft. Wall thickness or gauge No.			
TYPE OF SCREEN OR PERFORATION MATERIAL:	7 PVC	10 Asbestos-cement	
<u>1 Steel</u>	3 Stainless steel	8 RMP (SR)	11 Other (specify) <u>NA</u>
2 Brass	4 Galvanized steel	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	6 Wire wrapped	9 Drilled holes	
2 Louvered shutter	7 Torch cut	10 Other (specify) <u>NA</u>	
4 Key punched			
SCREEN-PERFORATED INTERVALS: From <u>NA</u> ft. to <u>NA</u> ft., From ft. to ft.			
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other
Grout Intervals: From <u>16</u> ft. to <u>6</u> ft., From ft. to ft., From ft. to ft.				
What is the nearest source of possible contamination:	10 Livestock pens	<u>14 Abandoned water well</u>		
1 Septic tank	4 Lateral lines	7 Pit privy	11 Fuel storage	15 Oil well/Gas well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	16 Other (specify below)
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage	
Direction from well? <u>5</u>			How many feet? <u>50'</u>	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>268'</u>	<u>180</u>	<u>SAND & GRAVEL</u>			
<u>180</u>	<u>16'</u>	<u>TOP SOIL</u>			
<u>16'</u>	<u>6'</u>	<u>CEMENT</u>			
<u>6'</u>	<u>3'</u>	<u>BENTONITE</u>			
<u>3'</u>		<u>BUILDING FLOOR W/ CEMENT</u>			

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) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/yr) <u>4-21-94</u> under the business name of <u>State Water Well Service Inc.</u> by (signature) <u>ELK</u>
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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.