

|                           |                      |                |                 |                 |
|---------------------------|----------------------|----------------|-----------------|-----------------|
| 1 LOCATION OF WATER WELL: | Fraction             | Section Number | Township Number | Range Number    |
| County: <u>Phillips</u>   | NW 1/4 SW 1/4 SE 1/4 | <u>27</u>      | T <u>3</u> S    | R <u>16</u> E/W |

Distance and direction from nearest town or city street address of well if located within city?  
Main S Railroad Avenue, Agra, KS

2 WATER WELL OWNER: Kansas Dept. of Health & Environment  
 RR#, St. Address, Box # : Forbes Field, Building 740 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : Topeka, KS 66620 Application Number:

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

N

|    |    |
|----|----|
| NW | NE |
| SW | SE |

S

X

4 DEPTH OF COMPLETED WELL: 51 ft. ELEVATION: 44 ft.

Depth(s) Groundwater Encountered 1. 41.97 ft. 2. 44 ft. 3. 6/2/97 ft.

WELL'S STATIC WATER LEVEL 41.97 ft. below land surface measured on mo/day/yr 6/2/97

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 6.25 in. to \_\_\_\_\_ 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 |
| 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 \_\_\_\_\_

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 _____                           |

Blank casing diameter 2 in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.

Casing height above land surface 24 in., weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No. Sch. 40

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 | 8 RMP (SR) | 11 Other (specify)       |
|         |                    |                 | 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 51 ft. to 41 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From 51 ft. to 39 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other \_\_\_\_\_

Grout Intervals: From 39 ft. to 2 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      | 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    | 9    | Building fill (brick & concrete) |      |    |                    |
| 9    | 29   | Loess silty clay                 |      |    |                    |
| 29   | 41   | Clay                             |      |    |                    |
| 41   | 48.5 | Sand                             |      |    |                    |
| 48.5 | 51   | Weathered shale - clay           |      |    |                    |

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) 5/30/97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 549 This Water Well Record was completed on (mo/day/yr) 6/4/97 under the business name of J & R Drilling Services, Inc. by (signature) Raymond Coons

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.