

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Phillips	NE $\frac{1}{4}$ SE $\frac{1}{4}$ SW $\frac{1}{4}$	34	T 3 S	R 18 W

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

Located at 1799 Center Road, Phillipsburg, KS

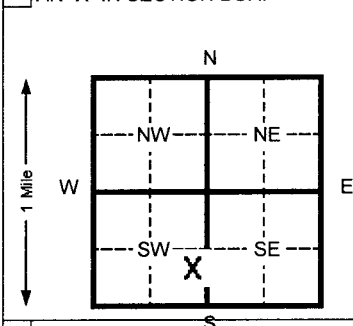
2 WATER WELL OWNER: **Phillips County Landfill**RR#, St. Address, Box #: **301 State Street**

Board of Agriculture, Division of Water Resources

City, State, ZIP Code: **Phillipsburg, KS. 67661**

Application Number:

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



4 DEPTH OF COMPLETED WELL

65 ft. ELEVATION:

Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.

WELL'S STATIC WATER LEVEL **DRY** ft. below land surface measured on mo/day/yr **4/19/2010**

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 **8.625** In. to **65** Ft. and _____ in. to _____ Ft.

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well

1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)

2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 **Monitoring well** **MW-10**Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X** If yes, mo/day/yr sample wasSubmitted _____ 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 _____Blank casing diameter **2** In. to **35** Ft., Dia _____ In. to _____ ft., Dia _____ in. to _____ ft.Casing height above land surface **FLUSH** in., weight **SCH 40** Lbs./ft. Wall thickness or gauge No. _____TYPE OF SCREEN OR PERFORATION MATERIAL: 7 **PVC** 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 3 **Mill slot** 6 Wire wrapped 9 Drilled holes

2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From **35** ft. to **65** ft. From _____ ft. to _____ ft.

From _____ ft. to _____ ft. From _____ ft. to _____ ft.

SAND PACK INTERVALS: From **33** ft. to **65** ft. From _____ ft. to _____ ft.

From _____ ft. to _____ ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 **Bentonite** 4 Other _____Grout Intervals From **31** ft. to **33** Ft. From **1** to **31** ft. From _____ ft. to _____ 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

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 **Landfill**

Direction from well? _____ How many feet? _____

FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS

0 1 Soil, silty clay loam

1 7 Silty Clay (CL), brown

7 11 Clayey Silt (ML), few fine sands

11 18 Sand (SW), fine to medium grain

18 22 Clayey Silt (ML)

22 29.5 Sandy clayey silt (ML)

29.5 32 Sand (SW), round to sub-round

32 40.5 Silty Clay (CL)

40.5 45 Clayey Sand, small gravel zone

45 65 Shale, dark grey to black

65 TD End Borehole

CORRECTED

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w

Completed on (mo/day/yr) **4/19/2010** And this record is true to the best of my knowledge and belief. KansasWater Well Contractor's License No. **585** This Water Well Record was completed on (mo/day/yr) **4/27/2010**under the business name of **Associated Environmental, Inc.** By (signature) **Bradley J. Johnson**

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send 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.

OFFICE USE ONLY

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