

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>DECATUR</u> <u>020</u>	<u>SE 1/4 NW 1/4 SW 1/4</u>	<u>1</u>	T <u>3</u> S	R <u>29</u> EW

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

2. KOLCHAVER AVE.

2 WATER WELL OWNER: <u>CITY OF OVERLIN</u>	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #: <u>177 W. COMMERCIAL</u>	Application Number:
City, State, ZIP Code: <u>OVERLIN, KS 67147</u>	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>43</u> ft. ELEVATION: <u>2557.09</u>
	Depth(s) Groundwater Encountered: <u>1</u> ft. 2. <u>1</u> ft. 3. <u>1</u> ft. WELL'S STATIC WATER LEVEL: <u>2571</u> ft. below land surface measured on mo/day/yr <u>1/20/73</u> Pump test data: Well water was <u>1</u> ft. after <u>1</u> hours pumping <u>1</u> gpm Est. Yield <u>1</u> gpm: Well water was <u>1</u> ft. after <u>1</u> hours pumping <u>1</u> gpm Bore Hole Diameter: <u>7 1/2</u> in. to <u>43</u> ft., and: <u>1</u> in. to <u>1</u> ft. WELL WATER TO BE USED AS: 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 11 Injection well 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well 12 Other (Specify below) Was a chemical/bacteriological sample submitted to Department? Yes <u>1</u> No <u>1</u> If yes, mo/day/yr sample was submitted <u>1</u> Water Well Disinfected? Yes <u>1</u> No <u>1</u>

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>1</u> Clamped <u>1</u>
1 Steel	6 Asbestos-Cement	9 Other (specify below)	Welded <u>1</u>
2 PVC	7 Fiberglass		Threaded <u>1</u>
3 RMP (SR)			
4 ABS			
Blank casing diameter: <u>2</u> in. to <u>23</u> ft., Dia. <u>1</u> in. to <u>1</u> ft., Dia. <u>1</u> in. to <u>1</u> ft.			
Casing height above land surface: <u>1</u> in., weight <u>1</u> lbs./ft. Wall thickness or gauge No. <u>2CH 40</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:	5 Gauzed wrapped	8 RMP (SR)	10 Asbestos-cement
1 Steel	6 Wire wrapped	9 ABS	11 Other (specify)
2 Brass	7 Torch cut		12 None used (open hole)
3 Stainless steel	8 Saw cut		11 None (open hole)
4 Galvanized steel	9 Drilled holes		
6 Concrete tile	10 Other (specify)		
SCREEN OR PERFORATION OPENINGS ARE:			
1 Continuous slot			
2 Louvered shutter			
3 Mill slot			
4 Key punched			
SCREEN-PERFORATED INTERVALS: From <u>23</u> ft. to <u>43</u> ft., From <u>1</u> ft. to <u>1</u> ft., From <u>1</u> ft. to <u>1</u> ft., From <u>1</u> ft. to <u>1</u> ft.			
GRAVEL PACK INTERVALS: From <u>1</u> ft. to <u>1</u> ft., From <u>1</u> ft. to <u>1</u> ft., From <u>1</u> ft. to <u>1</u> ft., From <u>1</u> ft. to <u>1</u> ft.			

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	TOP SOIL			
1	3'4"	BROWN CLAY			
3'4"	18'7"	RED BROWN CLAY			
18'7"	25	DK TAN/BROWN CLAY			
25	28	AL. SAMPLE RECOVERY			
28	28'2"	CLAY & S. DET			
28'2"	29'0"	BLUE GRAY CLAY			
29'0"	30	03 TAN-BROWN MUDY CLAY, S. DET, SANDY			
30	35	AL. SAMPLE RECOVERY POOL			
		LOTS OF CLAY & SAND AND LARGE			
		CONCRETE RIGGERS			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>1</u> constructed, <u>2</u> reconstructed, or <u>3</u> plugged under my jurisdiction and was completed on (mo/day/year) <u>1-2-73</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>254</u> This Water Well Record was completed on (mo/day/yr) <u>1-2-73</u> under the business name of <u>AND SERVICES</u> by (signature) <u>1</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.