

1] LOCATION OF WATER WELL: County: RAWLINS	Fraction NE 1/4 NW 1/4 NW 1/4	Section Number 20	Township Number T 3 S	Range Number R 33 EW
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Distance and direction from nearest town or city street address of well if located within city?

3 miles south of Atwood on west side of Hwy 25

2] WATER WELL OWNER: **RAWLINS COUNTY**
 RR#, St. Address, Box # : **607 MAIN STREET**
 City, State, ZIP Code : **ATWOOD KS 67730**
 Board of Agriculture, Division of Water Resources
 Application Number:

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

N			
X			
-NW-		-NE-	
W			E
-SW-		-SE-	
S			

4] DEPTH OF COMPLETED WELL **155** ft. ELEVATION:

Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft.
 WELL'S STATIC WATER LEVEL **135.31** 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
 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 Domestic (lawn & garden) **10 Monitoring well** **MW-3** 12 Other (Specify below)

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 **24** in. to **106** ft., Dia in. to ft., Dia in. to ft.
 Casing height above land surface **24** in., weight **34.40** lbs./ft. Wall thickness or gauge No.
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-Cement
 2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS 11 Other (Specify)
 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 **106** ft. to **130** 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 **5** ft. to **155** 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	5	NATIVE SOIL
			5	140	BENTONITE

RECEIVED
 NOV 12 2004
 BUREAU OF WATER

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) **2-21-04** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No **735** This Water Well Record was completed on (mo/day/yr) **11-2-04** under the business name of **MILCO ENVIRONMENTAL SERVICES** by (signature) **[Signature]**

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.