

1 LOCATION OF WATER WELL: County: <u>Decatur</u>		Fraction <u>SE 1/4 SE 1/4 SE 1/4</u>		Section Number <u>28</u>		Township Number <u>T 5 S</u>		Range Number <u>R 26 E/W</u>			
Distance and direction from nearest town or city street address of well if located within city? <u>1 mi. east and 1/2 mi. north of Allison, Kansas</u>											
2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code		<u>Jerry Kinser</u> <u>1201 Spruce St.</u> <u>Concordia, Kansas 66901</u> Board of Agriculture, Division of Water Resources Application Number:									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL: <u>114</u> ft. ELEVATION: _____								
1 Mile			Depth(s) Groundwater Encountered 1. <u>59</u> ft. 2. _____ ft. 3. _____ ft.								
			WELL'S STATIC WATER LEVEL <u>59</u> ft. below land surface measured on mo/day/yr								
			Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm								
			Est. Yield <u>10</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm								
			Bore Hole Diameter <u>7</u> in. to _____ ft., and _____ in. to _____ ft.								
WELL WATER TO BE USED AS:			5 Public water supply 8 Air conditioning 11 Injection well								
<u>1 Domestic</u>			3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)								
<u>2 Irrigation</u>			4 Industrial 7 Lawn and garden only 10 Monitoring well								
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample was submitted _____											
Water Well Disinfected? Yes <u>X</u> No _____											
5 TYPE OF BLANK CASING USED:											
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <u>X</u> Clamped _____											
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____											
7 Fiberglass Threaded _____											
Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.											
Casing height above land surface <u>12</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>214</u>											
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 5 Gauzed wrapped 8 Saw cut 11 None (open hole)											
2 Louvered shutter 6 Wire wrapped 9 Drilled holes											
4 Key punched 7 Torch cut 10 Other (specify) _____											
SCREEN-PERFORATED INTERVALS: From <u>94</u> ft. to <u>114</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.											
GRAVEL PACK INTERVALS: From <u>114</u> ft. to <u>25</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.											
6 GROUT MATERIAL: 1 Neat cement 2 <u>Cement grout</u> 3 Bentonite 4 Other _____											
Grout Intervals: From <u>25</u> ft. to <u>5</u> 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 <u>14 Abandoned water well</u>											
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 <u>Owner Will Plug</u>											
Direction from well? <u>South</u> How many feet? <u>25</u>											
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS	
0		27		Top							
27		42		Fine Sand							
42		44		sand							
44		45		sand stone							
45		48		sand							
48		81		clay							
81		95		limstone soft							
95		114		fine sand							
114				shale							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>12-2-98</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>398</u> This Water Well Record was completed on (mo/day/yr) <u>12-10-98</u> under the business name of <u>Kelley Drilling Co.</u> by (signature) <u>Richard O. Kelley</u>											
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.											