

County: <b>Cloud</b>	<b>SW ¼</b>	<b>NE ¼</b>	<b>NE ¼</b>	Section Number <b>32</b>	Township Number <b>T 5 S</b>	Range Number <b>R 3 E W</b>
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Distance and direction from nearest town or city street address of well if located within city?	
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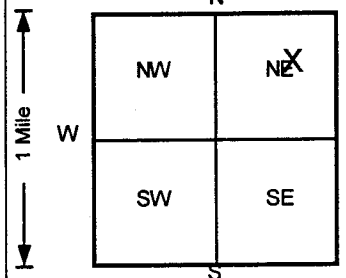
## Valley Fertilizer, Concordia, Kansas

2 WATER WELL OWNER:

2 WATER WELL OWNER: Valley Fertilizer  
 RR#, St. Address, Box # : West Hwy 9  
 City, State, ZIP Code : Concordia, Kansas 66901

Board of Agriculture, Division of Water Resources  
Application Number:

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



4 DEPTH OF COMPLETED WELL ..... 29 ..... ft. ELEVATION:

Depth(s) Groundwater Encountered 1. . . . . 8 . . . . . ft 2. . . . . ft 3. . . . . ft  
WELL'S STATIC WATER LEVEL . . . . . ft below land surface measured on mo/day/yr . . . . .  
Pump test data: Well water was . . . . . NA . . . . . ft after . . . . . hours pumping . . . . . gpm  
Est. Yield . . . . . NA . . . . . gpm: Well water was . . . . . ft after . . . . . hours pumping . . . . . gpm  
Bore Hole Diameter . . . . . 8 . . . . . in. to . . . . . 29 . . . . . 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 9 Dewatering 12 Other (Specify below)  
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well  
Was a chemical/bacteriological sample submitted to Department? Yes. . . . . No. ☒; If yes, mo/day/yr sample was submitted  
Water Well Disinfected? Yes No ☒

5	TYPE OF BLANK CASING USED:
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- 1 Steel  
2 PVC  
3 RMP (SR)  
4 ABS

- |                   |                         |
|-------------------|-------------------------|
| 5 Wrought iron    | 8 Concrete tile         |
| 6 Asbestos-Cement | 9 Other (specify below) |
| 7 Fiberglass      | .....                   |

CASING JOINTS: Glued . . . . . Clamped . . . . .  
Welded . . . . .  
Threaded. ✓ . . . . .

Blank casing diameter . . . . . 2 . . . . . in. to . . . . . 12 . . . . . ft, Dia . . . . . in. to . . . . . ft, Dia . . . . . in. to . . . . . ft  
Casing height above land surface . . . . . 0 . . . . . in., weight . . . . . Sch 40 . . . . . lbs./ft. Wall thickness or gauge No. . . . .

## TYPE OF SCREEN OR PERFORATION MATERIAL

- 1 Steel                      3 Stainless steel  
2 Brass                     4 Galvanized steel

- 5 Fiberglass                      8 RMP (SR)  
6 Concrete tile                9 ABS

- 10 Asbestos-cement  
11 Other (specify) .....  
12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

- 1 Continuous slot  
2 Louvered shutter  
3 Mill slot  
4 Key punched

- 5 Gauzed wrapped  
6 Wire wrapped  
7 Torch cut

- 8 Saw cut  
9 Drilled holes  
10 Other (specify) .....  
11 None (open hole)

SCREEN-PERFORATED INTERVALS:	From	12	ft to	27	ft,	From	ft to	ft
	From		ft to		ft,	From	ft to	ft
GRAVEL PACK INTERVALS:	From	10	ft to	29	ft,	From	ft to	ft
	From		ft to		ft,	From	ft to	ft

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

Grout Intervals: From 0 ft to 6 ft, From 6 ft to 10 ft, From . ft to . ft

What is the nearest source of possible contamination:

- |                          |                 |
|--------------------------|-----------------|
| 1 Septic tank            | 4 Lateral lines |
| 2 Sewer lines            | 5 Cess pool     |
| 3 Watertight sewer lines | 6 Seepage pit   |

- 7 Pit privy  
8 Sewage lagoon  
9 Feedyard

- |                        |                          |
|------------------------|--------------------------|
| 10 Livestock pens      | 14 Abandoned water well  |
| 11 Fuel storage        | 15 Oil well/Gas well     |
| 12 Fertilizer storage  | 16 Other (specify below) |
| 13 Insecticide storage | Unknown                  |

16 Other (specify below)  
Unknown

Direction from well?

[illegible]

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) 7/27/99 and this record is true to the best of my knowledge and belief.  
Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/yr) 7/30/99  
under the business name of GeoCore Services, Inc. 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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.