

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Osborne	SW $\frac{1}{4}$ SE $\frac{1}{4}$ NW $\frac{1}{4}$	27	T 6 S	R 11 E

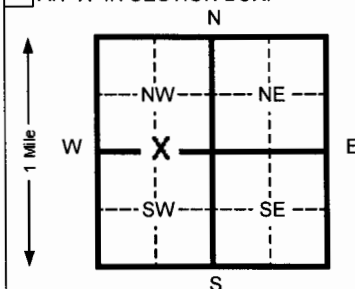
Distance and direction from nearest town or city street address of well if located within city?

N of Clark & Commercial Streets, Downs, KS. Latitude N 39.50214° Longitude W 98.53957°2 WATER WELL OWNER: **United Agri Products, Inc.**RR#, St. Address, Box # : **7251 West 4th Street**

Board of Agriculture, Division of Water Resources

City, State, ZIP Code : **Greeley, CO 80634**Application Number: **Not Applicable**

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



4 DEPTH OF COMPLETED WELL

34.5 ft. ELEVATION: **Unknown**Depth(s) Groundwater Encountered 1 **29** ft. 2 _____ ft. 3 _____ ft.WELL'S STATIC WATER LEVEL **Unk.** 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

Bore Hole Diameter **8** in. to **34.5** 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 wellWas a chemical/bacteriological sample submitted to Department? Yes _____ No **X** If yes, mo/day/yr sample was submittedWater Well Disinfected? Yes _____ No **X**

5 TYPE OF BLANK CASING USED:

5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____

1 Steel 3 RMP (SR)

6 Asbestos-Cement 9 Other (specify below)

Welded

2 PVC 4 ABS

7 Fiberglass

ThreadedBlank casing diameter **2** in. to **24.1** ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.Casing height above land surface **approx. 40** in., weight **0.682** lbs./ft. Wall thickness or gauge No. **0.1875 in.**

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) _____

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot **3** Mill slot 6 Wire wrapped 8 Saw cut 11 None (open hole)

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

SCREEN-PERFORATED INTERVALS: From **24.1** ft. to **34.5** ft. From _____ ft. to _____ ft.

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

GRAVEL PACK INTERVALS: From **22.1** ft. to **34.5** 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 **0** ft. to **22.1** 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 **12** Fertilizer storage 15 Oil well/ Gas well

3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below) _____

Direction from well? **west**How many feet? **approximately 80 feet**

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	17	Silty sand and gravel (fill)			
1	5	01	Brown, fat clay with silt			
5	11	02	Light brown to tan silt with clay			
11	19.5	01	Light brown, lean clay with silt			
19.5	23	02	Light brown to tan silt with clay			
23	25	01	Light brown to tan, lean clay			
25	26	02	Light brown to tan silt with clay			
26	32.5	01	Light brown, fat clay			
32.5	34.5	05	Fine to medium sand, trace silt			

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/yr) **12/5/07** and this record is true to the best of my knowledge and belief. KansasWater Well Contractor's License No. **616** This Water Well Record was completed on (mo/day/yr) **1/9/08**under the business name of **Thiele Geotech, Inc.** by (signature) *D. J. Al*

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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