

<b>1 LOCATION OF WATER WELL:</b> County: <u>Rooks</u>	Fraction <u>NW 1/4 SE 1/4 SW 1/4</u>	Section Number <u>22</u>	Township Number <u>T 7 S</u>	Range Number <u>R 18 E</u> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">W</span>
Distance and direction from nearest town or city street address of well if located within city? <u>Approximately 2 miles west and 3/4 mile south of Stockton</u>		<b>Global Positioning Systems</b> (decimal degrees, min. of 4 digits) Latitude: <u>39.425744</u> Longitude: <u>-99.318828</u> Elevation: <u>Unknown</u> Datum: <u>NAD83</u> Data Collection Method: <u>WAAS GPS Unit</u>		
<b>2 WATER WELL OWNER:</b> <u>City of Plainville</u> RR#, St. Address, Box # : <u>P.O. Box 266</u> City, State, ZIP Code : <u>Plainville, KS 67663</u>				

<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> N  W E S	<b>4 DEPTH OF COMPLETED WELL</b> <u>42</u> ft. Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL <u>12</u> ft. below land surface measured on <u>11-28-06</u> Pump test data: Well water was <u>Not checked</u> ft. after _____ hours pumping _____ gpm Est. Yield <u>Unknown</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">5</span> 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 Domestic (lawn & garden) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yrs _____ Sample was submitted _____ Water well disinfected? Yes <input checked="" type="checkbox"/> No _____
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<b>5 TYPE OF CASING USED:</b> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">1</span> Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 2 PVC 4 ABS 7 Fiberglass	5 Wrought Iron 8 Concrete tile 6 Asbestos-Cement 9 Other (specify below)	CASING JOINTS: Glued _____ Clamped _____ Welded <input checked="" type="checkbox"/> Threaded _____
Blank casing diameter <u>12</u> in. to <u>28</u> ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft. Casing height above land surface <u>24</u> in., weight <u>49.56</u> lbs./ft. Wall thickness or gauge No. <u>.375</u>		
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">3</span> Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) _____ 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)		
SCREEN OR PERFORATION OPENINGS ARE: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">1</span> Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (Specify) _____		
SCREEN-PERFORATED INTERVALS: From <u>28</u> ft. to <u>40</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.		
GRAVEL PACK INTERVALS: From <u>23</u> ft. to <u>40.5</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.		

<b>6 GROUT MATERIAL:</b> 1 Neat Cement <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">2</span> Cement grout 3 Bentonite <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">4</span> Other _____	Bentonite Holeplug
Grout Intervals: From <u>4</u> ft. to <u>21</u> ft., From _____ ft. to _____ ft., From <u>21</u> ft. to <u>23</u> ft.	
What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">16</span> Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well _____ 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well _____ <u>None known</u>	
Direction from well? _____ How many feet? _____	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Topsoil	37	40	Sand and gravel, fine to medium, coarse
3	5	Clay	40	40.5	Shale
5	8	Sand, fine, medium			
8	10	Clay and sand			
10	14	Sand and gravel, fine to medium			
14	15	Clay, soft and slimy			
15	24	Sand and gravel, fine to medium			
24	28	Sand and gravel, fine to medium, coarse, with clay and limestone cobble			
28	37	Sand and gravel, fine to medium, with some clay			

<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">constructed</span> (2) reconstructed (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>11-28-06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>185</u> This Water Well Record was completed on (mo/day/year) <u>12-01-06</u> Under the business name of <u>Clarke Well &amp; Equipment, Inc.</u> by (signature) <u>[Signature]</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, 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.