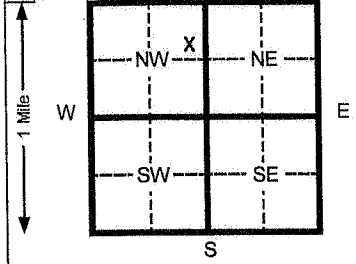


1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Rooks	SE ¼ NE ¼ NW ¼	24	T 7 S	R 18 W

Distance and direction from nearest town or city street address of well if located within city?
Near intersection of S. 2nd St. and S. Cypress St. - Stockton

2 WATER WELL OWNER: **KDHE**
 RR#, St. Address, Box #: **1000 SW Jackson St., Ste. 410** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **Topeka, KS 66612** Application Number:

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



4 DEPTH OF COMPLETED WELL **31.87** ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL **8.03** ft. below TOC measured on **05/09/13**
 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 **8.25** in. to **31.87** 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 well**
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X** If yes, mo/day/yr sample was submitted _____
 Water 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 _____ Threaded **Flush**

Blank casing diameter **2** in. to **21.87** ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface **0** in., weight **0.703** lbs./ft. Wall thickness or gauge No. **SCH. 40**

TYPE OF SCREEN OR PERFORATION MATERIAL: **7 PVC** 10 Asbestos-cement
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot **3 Mill slot** 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From **21.87** ft. to **31.87** ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **20** ft. to **31.87** ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout **3 Bentonite** 4 Other _____
 Grout intervals From **1** ft. to **20** 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	CODE	FROM	TO
0	0.5			
0.5	5			
5	5.75			
5.75	10			
10	31.87			

LITHOLOGIC LOG

0	0.5	Topsoil
0.5	5	Lithology not logged
5	5.75	Silty Clay, dark brown
5.75	10	Clayey Silt, brown
10	31.87	Sand, medium grained, trace gravel throughout, with sandy silt layers between 20' and 25'

PLUGGING INTERVALS

Survey:
 Latitude: **39.43433**
 Longitude: **99.27923**

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) **05/10/13** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **531** This Water Well Record was completed on (mo/day/yr) **05/14/13** under the business name of **GSI Engineering, LLC** by (signature) _____

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

T

R

SEC