

1 LOCATION OF WATER WELL: County: **Graham** Fraction: **NW ¼ NW ¼ NW ¼** Section Number: **13** Township Number: **T 8 S** Range Number: **R 23 E 11**

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

406 W. Main - Hill City, KS

2 WATER WELL OWNER: **Consolidated State Bank**

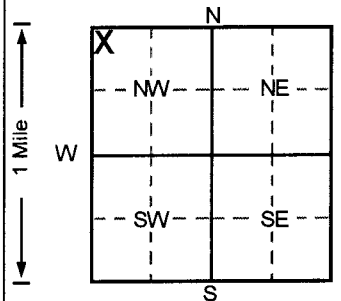
RR#, St. Address, Box# : **P.O. Box 369**

City, State, ZIP Code : **Hill City, Kansas 67642**

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: **50** ft. ELEVATION: **2190.82**

Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL . . . **38.41** . . . ft. below land surface measured on mo/day/yr . . . **1/30/96**

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 . . . **50** . . . 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:

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. **✓**

Blank casing diameter **2** in. to **30** ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface **-1.08** in., weight lbs./ft. Wall thickness or gauge No. . . . **Sch. 40**

TYPE OF SCREEN OR PERFORATION MATERIAL

1 Steel 3 Stainless steel 5 Fiberglass **7** PVC 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 5 Gauzed wrapped 8 Saw cut 11 None (open hole)

2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes

7 Torch cut 10 Other (specify)

SCREEN-PERFORATED INTERVALS: From **30** ft. to **50** ft., From ft. to ft.

GRAVEL PACK INTERVALS: From **28** ft. to **50** ft., From ft. to ft.

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

Grout Intervals: From **0** ft. to **26** ft., From **26** ft. to **28** 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)

Direction from well? **NW** How many feet? **714**

FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS

0 **0.5** **Asphalt,**

0.5 **3** **Clay, Dark Brown**

3 **16** **Clay, Light Brown**

16 **20** **Clay, Red Brown**

20 **26** **Sand, Red Brown**

26 **31** **Clay, Yellow Brown to Tan**

31 **39** **Sand, Light Brown to Gray Brown**

39 **50** **Clay, Gray**

MW5, Tag # 00159728, Flushmount

Project Name: Hill City APCO

GeoCore # 200, KDHE # U6 033 765

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) **2/16/96** 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) **3/4/96**

under the business name of **GeoCore Services, Inc.** by (signature) *Bob Bobb*

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.

OFFICE USE ONLY

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