

1 LOCATION OF WATER WELL: County: Dickinson	Fraction SE 1/4 NE 1/4 NE 1/4	Section Number 7	Township Number T 14 S	Range Number R 1 E
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Distance and direction from nearest town or city street address of well if located within city?

4 Miles South of Solomon, KS

2 WATER WELL OWNER: Ray Kohlman RR#, St. Address, Box # : R.R. 2 City, State, ZIP Code : Solomon, KS 67479	Board of Agriculture, Division of Water Resources Application Number:
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: 40 ft. ELEVATION:
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Depth(s) Groundwater Encountered 1. **18** ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL **18** ft. below land surface measured on mo/day/yr **7-11-91**

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield **200-500** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter **1.8** in. to **40** ft., and **1.0** in. to **61** 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
2 Irrigation	4 Industrial	7 Lawn and garden only
		10 Monitoring well
9 Dewatering		
12 Other (Specify below)		

Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X**; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes **X** No _____

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued X Clamped _____
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
2 PVC	4 ABS	7 Fiberglass	Welded _____
Blank casing diameter 1.2 in. to 40 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.			Threaded _____
Casing height above land surface 1.2 in., weight 12.52 lbs./ft. Wall thickness or gauge No. 490			
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC	10 Asbestos-cement
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
			11 Other (specify) _____
			12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped	8 Saw cut
1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify) _____
			11 None (open hole)
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From 25 ft. to 40 ft., From _____ ft. to _____ ft.			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	<u>3 Bentonite</u>	4 Other _____
Grout Intervals: From 5 ft. to 25 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.				
What is the nearest source of possible contamination:		10 Livestock pens	14 Abandoned water well	
<u>1 Sепtic tank</u>	4 Lateral lines	7 Pit privy	11 Fuel storage	
2 Sewer lines	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage	
15 Oil well/Gas well	16 Other (specify below)			
Direction from well? NORTH		How many feet? 600 ft		

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Top Soil			
2	10	Brown Clay			
10	38	Shale			
38	40	Hard Shale			
		Cased 40ft			
		Drilled 10" Open Hole			
40	41	Limestone			
41	44	Open Cavity/Lost Circulation			
44	45	Limestone			
45	60	Loose Fractured Shale & Limestone			
60	61	Hard Limestone			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 7-11-91 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 138 This Water Well Record was completed on (mo/day/yr) 8-11-91 under the business name of Peterson Irrigation, Inc. by (signature) <i>Mike Peterson</i>	
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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, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.