

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>MORRIS</u>	<u>NW 1/4 NW 1/4 NE 1/4</u>	<u>18</u>	T <u>16</u> S	R <u>8</u> EW

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

2 WATER WELL OWNER: DON E LIVINGTON K17 CITY LAKE COUNCIL GROVE
 RR#, St. Address, Box # 1029 MCLEAN BLVD. NW Board of Agriculture, Division of Water Resources
 City, State, ZIP Code WICHITA KS 67203 Application Number:

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

4 DEPTH OF COMPLETED WELL 8.0 ft. ELEVATION: ft.

Depth(s) Groundwater Encountered 35 ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL 35 ft. below land surface measured on mo/day/yr

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

Est. Yield 5 gpm Well water was ft. after hours pumping gpm

Bore Hole Diameter 8 in. to ft., and in. to ft.

WELL WATER TO BE USED AS:

<input checked="" type="checkbox"/> 1 Domestic	<input type="checkbox"/> 3 Feedlot	<input type="checkbox"/> 6 Oil field water supply	<input type="checkbox"/> 9 Dewatering	<input type="checkbox"/> 11 Injection well
<input type="checkbox"/> 2 Irrigation	<input type="checkbox"/> 4 Industrial	<input type="checkbox"/> 7 Lawn and garden only	<input type="checkbox"/> 10 Observation well	<input type="checkbox"/> 12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes.....No X.....; If yes, mo/day/yr sample was sub-
 mitted Water Well Disinfected? Yes X No

5 TYPE OF BLANK CASING USED:

<input type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 RMP (SR)	<input type="checkbox"/> 5 Wrought iron	<input type="checkbox"/> 8 Concrete tile	CASING JOINTS: Glued Clamped
<input checked="" type="checkbox"/> 2 PVC	<input type="checkbox"/> 4 ABS	<input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 9 Other (specify below)	Welded
		<input type="checkbox"/> 7 Fiberglass		Threaded

Blank casing diameter 5.6 in. to 3.0 ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface 1.2 in., weight lbs./ft. Wall thickness or gauge No. 160

TYPE OF SCREEN OR PERFORATION MATERIAL:

<input type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 Stainless steel	<input type="checkbox"/> 5 Fiberglass	<input type="checkbox"/> 8 RMP (SR)	<input type="checkbox"/> 10 Asbestos-cement
<input type="checkbox"/> 2 Brass	<input type="checkbox"/> 4 Galvanized steel	<input type="checkbox"/> 6 Concrete tile	<input type="checkbox"/> 9 ABS	<input type="checkbox"/> 11 Other (specify)
				<input type="checkbox"/> 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

<input type="checkbox"/> 1 Continuous slot	<input type="checkbox"/> 3 Mill slot	<input type="checkbox"/> 5 Gauzed wrapped	<input checked="" type="checkbox"/> 8 Saw cut	<input type="checkbox"/> 11 None (open hole)
<input type="checkbox"/> 2 Louvered shutter	<input type="checkbox"/> 4 Key punched	<input type="checkbox"/> 6 Wire wrapped	<input type="checkbox"/> 9 Drilled holes	
		<input type="checkbox"/> 7 Torch cut	<input type="checkbox"/> 10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From 3.0 ft. to 5.0 ft., From ft. to ft.

GRAVEL PACK INTERVALS: From 1.2 ft. to 8.0 ft., From ft. to ft.

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

Grout Intervals: From 0 ft. to 1.2 ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> 1 Septic tank	<input type="checkbox"/> 4 Lateral lines	<input type="checkbox"/> 7 Pit privy	<input type="checkbox"/> 10 Livestock pens	<input type="checkbox"/> 14 Abandoned water well
<input type="checkbox"/> 2 Sewer lines	<input type="checkbox"/> 5 Cess pool	<input type="checkbox"/> 8 Sewage lagoon	<input type="checkbox"/> 11 Fuel storage	<input type="checkbox"/> 15 Oil well/Gas well
<input type="checkbox"/> 3 Watertight sewer lines	<input type="checkbox"/> 6 Seepage pit	<input type="checkbox"/> 9 Feedyard	<input type="checkbox"/> 12 Fertilizer storage	<input checked="" type="checkbox"/> 16 Other (specify below)
			<input type="checkbox"/> 13 Insecticide storage	

Direction from well? How many feet? 50 WEST HOLDING TANK

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	DIRT			
2	10	ROCK YELLOW			
10	20	ROCK WHITE			
20	32	SHALE BLUE			
32	42	SHALE RED			
42	47	LIME ROCK GRAY			
47	60	SHALE BLUE			
60	65	LIME ROCK GRAY			
65	80	SHALE BLUE			

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) 10-5-81 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 156 This Water Well Record was completed on (mo/day/yr) Oct. 26-81 under the business name of L.H. MRAUSE SHOP by (signature) L.H. Mrause

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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.