

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Franklin</u>		<u>NE 1/4 NE 1/4 NW 1/4</u>	<u>32</u>	<u>T 17 S</u>	<u>R 18 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>5 South 1/2 east Pomona</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box #		Application Number:			
City, State, ZIP Code		<u>Pomona 66076</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 210 ft. ELEVATION: 210 ft.			
		Depth(s) Groundwater Encountered <u>145</u> ft. 2. <u>201</u> ft. 3. <u>210</u> ft.			
		WELL'S STATIC WATER LEVEL <u>145</u> ft. below land surface measured on <u>2/14/83</u>			
		Pump test data: Well water was <u>2</u> ft. after <u>6 1/4</u> hours pumping <u>210</u> gpm			
		Est. Yield <u>2</u> gpm Well water was <u>2</u> ft. after <u>6 1/4</u> hours pumping <u>210</u> gpm			
		Bore Hole Diameter <u>8 1/4</u> in. to <u>20</u> ft. and <u>6 1/4</u> in. to <u>210</u> 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"/> 12 Other (Specify below) <input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 4 Industrial <input type="checkbox"/> 7 Lawn and garden only <input type="checkbox"/> 10 Observation well			
		Was a chemical/bacteriological sample submitted to Department? Yes <u>No</u> If yes, mo/day/yr sample was submitted <u>No</u>			
		Water Well Disinfected? Yes <u>No</u>			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <u>Clamped</u>			
<input checked="" type="checkbox"/> 1 Steel <input type="checkbox"/> 3 RMP (SR)		<input type="checkbox"/> 5 Wrought iron <input type="checkbox"/> 8 Concrete tile <input type="checkbox"/> Welded			
<input type="checkbox"/> 2 ABS		<input type="checkbox"/> 6 Asbestos-Cement <input type="checkbox"/> 9 Other (specify below)			
<input type="checkbox"/> 6 1/4 in. to 20 ft. Dia		<input type="checkbox"/> 7 Fiberglass <input type="checkbox"/> 10 Asbestos-cement <input type="checkbox"/> Threaded			
Blank casing diameter <u>6 1/4</u> in. to <u>20</u> ft. Dia		<input type="checkbox"/> 11 Other (specify)			
Casing height above land surface <u>18</u> in. weight <u>Sch 40</u> lbs./ft. Wall thickness or gauge No. <u>Sch 40</u>		<input type="checkbox"/> 12 None used (open hole)			
TYPE OF SCREEN OR PERFORATION MATERIAL:		<input checked="" type="checkbox"/> 7 PVC			
<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)			
SCREEN OR PERFORATION OPENINGS ARE:		<input checked="" type="checkbox"/> 8 Saw cut <input type="checkbox"/> 11 None (open hole)			
<input type="checkbox"/> 1 Continuous slot <input type="checkbox"/> 4 Key punched		<input type="checkbox"/> 6 Wire wrapped <input type="checkbox"/> 9 Drilled holes			
<input type="checkbox"/> 2 Louvered shutter <input type="checkbox"/> 7 Torch cut		<input type="checkbox"/> 10 Other (specify)			
SCREEN-PERFORATED INTERVALS:		From <u>180</u> ft. to <u>210</u> ft.			
GRAVEL PACK INTERVALS:		From <u>NONE</u> ft. to <u>NONE</u> ft.			
6 GROUT MATERIAL:		3 Bentonite    4 Other			
Grout Intervals: From <u>3</u> ft. to <u>20</u> ft.		From <u>20</u> ft. to <u>210</u> ft.			
What is the nearest source of possible contamination:		10 Livestock pens    14 Abandoned water well			
<input checked="" type="checkbox"/> 1 Septic tank <input type="checkbox"/> 4 Lateral lines <input type="checkbox"/> 7 Pit privy <input type="checkbox"/> 11 Fuel storage <input type="checkbox"/> 15 Oil well/Gas well		<input type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 5 Cess pool <input type="checkbox"/> 8 Sewage lagoon <input type="checkbox"/> 12 Fertilizer storage <input type="checkbox"/> 16 Other (specify below)			
<input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 9 Feedyard <input type="checkbox"/> 13 Insecticide storage		How many feet? <u>100</u>			
Direction from well? <u>East</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	20	Soil & Shelly Rock			
20	33	Lime			
33	50	Shald			
50	63	Lime			
63	73	Black Shald			
73	78	Lime			
78	84	White Shald			
84	109	Lime			
109	112	Shald			
112	199	Lime			
199	201	Shald			
201	210	Gravel sand			
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) <u>Feb 14, 83</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>381</u> This Water Well Record was completed on (mo/day/yr) <u>8-8-83</u> under the business name of <u>Rokee Swank Drilling</u> by (signature) <u>Rokee Swank</u>					
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.					

OFFICE USE ONLY

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R

18

OW

SEC.

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NE 1/4

NE 1/4

NW 1/4