

to BWS 8-11-80

LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: LYON	SW 1/4 SW 1/4 NW 1/4	10	T 18 S	R 10 EW

Distance and direction from nearest town or city? **1.5 W of Americus** Street address of well if located within city?

WATER WELL OWNER: **LYON COUNTY RWD #1 Well # 7**
 RR#, St. Address, Box #: **BOX 187** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **AMERICUS, KS. 66835** Application Number:

DEPTH OF COMPLETED WELL: **41** ft. Bore Hole Diameter: **18** in. to ft., and in. to ft.

Well Water to be used as:
 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 7 Lawn and garden only 10 Observation well

Well's static water level: **26'-8"** below land surface measured on **July** month **8** day **1980** year
 Pump Test Data: Well water was **32'-11"** after **2** hours pumping **112** gpm
 Est. Yield **100** gpm: Well water was **33'-5"** after **4** hours pumping **112** gpm

TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued Clamped
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded
 7 Fiberglass Threaded

Blank casing dia: **8** in. to **0-32** ft. Dia: **8** in. to **37-41** ft. Dia: in. to ft.
 Casing height above land surface: **36** in., weight **28.55** lbs./ft. Wall thickness or gauge No. **322**

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 8 RMP (SR) 11 Other (specify)
 9 ABS 12 None used (open hole)

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 **Johnson 80 slot** 9 Drilled holes
 7 Torch cut 10 Other (specify)

Screen-Perforation Dia: **8** in. to ft. Dia: in. to ft. Dia: in. to ft.
 Screen-Perforated Intervals: From **32** ft. to **37** ft. From ft. to ft. to ft. to ft.
 Gravel Pack Intervals: From **25** ft. to **41** ft. From ft. to ft. to ft. to ft.

GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
 Grouted Intervals: From **5** ft. to **25** ft. From ft. to ft. to ft. to ft.

What is the nearest source of possible contamination: **Creek - 100ft West**
 1 Septic tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 15 Oil well/Gas well
 3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines 16 Other (specify below)

Direction from well: **100 W** How many feet: **100**? Water Well Disinfected? Yes No

Was a chemical/bacteriological sample submitted to Department? Yes No If yes, date sample was submitted: **July** month **8** day **1980** year: Pump Installed? Yes No

If Yes: Pump Manufacturer's name: **JACUZZI** Model No. **554XP18** HP **5** Volts **230**
 Depth of Pump Intake: **35** ft. Pumps Capacity rated at: **40** gal./min.

Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on **July** month day **1980** year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **182**
 This Water Well Record was completed on **July** month **30** day **1980** year under the business name of **STRAIDER DRILLING CO INC** by (signature) **Dale Cabern**

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	3	TOP SOIL			
		3	25	CLAY BROWN			
		25	37	CHERT GRAVEL 1/4 X 1/8 X 1			
		37	39	LIMESTONE, grey			
		39	41	SHALE, grey			
ELEVATION:							

Depth(s) Groundwater Encountered 1. **25** ft. 2. ft. 3. ft. 4. ft. (Use a second sheet if needed)

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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.