

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Marshall</u>		NW 1/4 SW 1/4 SE 1/4	<u>7</u>	T <u>1</u> S	R <u>6</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>SN 1/2 W 1/2 N Brewman</u>					
2 WATER WELL OWNER: <u>Theodore Kruger</u>					
RR#, St. Address, Box # : <u>R.F.D. 1</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Hanover, Kansas 66945</u>			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>210</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>80</u> ft. below land surface measured on mo/day/yr <u>K-25-89</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>15</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>8</u> in. to <u>210</u> ft. and _____ in. to _____ ft.			
		WELL WATER TO BE USED AS:			
		5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic <u>X</u> 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 <u>X</u> ; If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes <u>X</u> No _____			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
2 PVC <u>✓</u>		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
Blank casing diameter <u>5</u> in. to <u>110</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.		8 Concrete tile			
Casing height above land surface <u>24</u> in. weight <u>200</u> lbs./ft. Wall thickness or gauge No. _____		9 Other (specify below) _____			
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC <u>X</u>			
1 Steel		3 Stainless steel		10 Asbestos-cement	
2 Brass		4 Galvanized steel		11 Other (specify) _____	
				12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped			
1 Continuous slot		3 Mill slot		8 Saw cut <u>X</u>	
2 Louvered shutter		4 Key punched		11 None (open hole)	
				9 Drilled holes	
SCREEN-PERFORATED INTERVALS:		7 Torch cut			
From _____ ft. to _____ ft.		10 Other (specify) _____			
From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS:					
From _____ ft. to _____ ft.					
From _____ ft. to _____ ft.					
From _____ ft. to _____ ft.					
From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement		2 Cement grout		3 Bentonite <u>X</u>	
4 Other _____					
Grout Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines		7 Pit privy	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well <u>✓</u>	
				15 Oil well/Gas well	
				16 Other (specify below) _____	
Direction from well? <u>NW</u>		How many feet? <u>15</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	4	Top soil			
4	12	Brown clay			
12	55	tan clay			
55	56	limestone			
56	61	yellow shale			
61	90	gray shale			
90	116	red shale			
116	128	tan shale			
128	156	gray shale			
156	158	limestone			
158	198	gray shale			
198	200	limestone			
200	210	gray shale			
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>4-28-89</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>234</u> This Water Well Record was completed on (mo/day/yr) _____ under the business name of <u>Blue Valley Drilling</u> by (signature) <u>Betty Jo Strader</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, Bureau of Water Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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