

OFFICE USE ONLY

T

21

R

8

EW

SEC

22

NW 1/4

NE 1/4

SE 1/4

SW 1/4

1 LOCATION OF WATER WELL
 County: Chase Fraction: NW 1/4 NE 1/4 SE 1/4 Section Number: 22 Township Number: T 21 S Range Number: R 8 E
 Distance and direction from nearest town or city? Bazaar KS. 4 1/2 S. 1 E Street address of well if located within city?

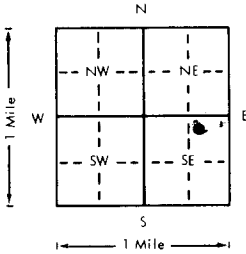
2 WATER WELL OWNER: B G Wells
 RR#, St. Address, Box #: RR-1 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Cottonwood Falls KS 66845 Application Number: NA

3 DEPTH OF COMPLETED WELL: 25 ft. Bore Hole Diameter: 10' in. to 25 ft., and _____ in. to _____ ft.
 Well Water to be used as:
 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: 7.5' ft. below land surface measured on 4 month 11 day 80 year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield: _____ gpm Well water was _____ ft. after _____ hours pumping _____ gpm

4 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 60 25' ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: _____ in., weight _____ lbs./ft. Wall thickness or gauge No: 3/8
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____
 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 9 Drilled holes
 7 Torch cut 10 Other (specify) _____
 Screen-Perforation Dia: 3/8 in. to 23 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 10 ft. to 23' Holes + Saw slot ft. to _____ ft. to _____ ft. to _____ ft.
 Gravel Pack Intervals: From 8.5 ft. to 25 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
 Grouted Intervals: From 3 ft. to 8.5 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below) Creek
 13 Watertight sewer lines
 Direction from well: E How many feet: 75'? Water Well Disinfected? Yes No
 Was a chemical/bacteriological sample submitted to Department? (Yes) No _____ If yes, date sample was submitted: 5 month 2 day 80 year Pump Installed? Yes No
 If Yes: Pump Manufacturer's name: Goulds Model No: 25 EL HP 3 Volts 220
 Depth of Pump Intake: 22' ft. Pumps Capacity rated at 25 gal./min.
 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month _____ day _____ year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 203
 This Water Well Record was completed on _____ month _____ day _____ year under the business name of McNee Drilling by (signature) James

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

 FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG
0 1 TS DK Brown _____ _____
1 6 CL Red Brown. _____ _____
6 21 Flint Gravel _____ _____
21 25 DK Gray Sh. _____ _____
25 _____ Lime TD _____ _____

ELEVATION:
 Depth(s) Groundwater Encountered 1. 7.5 ft. 2. 20 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.