

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Bourbon</u>		<u>NW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	<u>22</u>	T <u>27</u> S	R <u>25</u> <u>EN</u>
Distance and direction from nearest town or city street address of well if located within city? <u>3 mi. NW of Arcadia, KS</u>					
2 WATER WELL OWNER: <u>Clemens Coal Co.</u>					
RR#, St. Address, Box # : <u>320 N Locust</u>					
City, State, ZIP Code : <u>Pittsburg, KS 66762</u>					
Board of Agriculture, Division of Water Resources Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>23</u> ft. ELEVATION: <u>840</u> Top <u>872</u> , Bot. <u>849</u>			
<div style="text-align: center;">N 1 Mile W X E S</div>		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>10</u> ft. below land surface measured on mo/day/yr <u>12/5/96</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield _____ gpm Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>4-6</u> in. to <u>7D</u> in. and _____ in. to _____ in.			
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well			
		1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)			
		2 Irrigation 4 Industrial 7 Lawn and garden only <u>10</u> Monitoring well <u>Piezometer</u>			
		Was a chemical/bacteriological sample submitted to Department? Yes <u>10</u> If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes <u>No</u>			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
<u>2</u> PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
			7 Fiberglass		Threaded <u>X</u>
Blank casing diameter <u>2</u> in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface <u>10</u> in., weight _____ lbs./ft. Wall thickness or gauge No. _____					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel	5 Fiberglass	<u>7</u> 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:					
<u>1</u> 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-PERFORATED INTERVALS: From <u>23</u> ft. to <u>18</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>23</u> ft. to <u>13</u> ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3</u> Bentonite <u>4</u> Other <u>Drill cuttings</u>					
Grout Intervals: From <u>10</u> ft. to <u>0</u> 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	10 Livestock pens	14 Abandoned water well
2 Sewer lines		5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines		6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
				13 Insecticide storage	<u>None</u>
Direction from well? _____ How many feet? _____					
FROM TO Ft. LITHOLOGIC LOG FROM TO PLUGGING INTERVALS					
0 3 Topsoil					
3 9 Dark Brown Clay					
9 12 Greenish/Brown Clay					
12 17 Tan Clay					
17 18 Gray Shale					
18 19 Sandy Gray Shale					
19 21.25 Black Shale					
21.25 22.25 Coal					
22.25 23 Gray Underclay					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>1</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>12/2/96</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>419</u> This Water Well Record was completed on (mo/day/yr) <u>1/02/97</u> under the business name of <u>FREDDY VANE</u> by (signature) <u>Fred Van Deulane</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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

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