

1 LOCATION OF WATER WELL:		Fraction Near <del>XXXXXX</del> <u>SW</u>		Section Number <u>11</u>		Township Number <u>T 30 S</u>		Range Number <u>R 1 E</u>	
County: <u>Sumner</u>									
Distance and direction from nearest town or city street address of well if located within city? <u>3 1/2 miles north of Belle Plaine, KS</u>									
2 WATER WELL OWNER: <u>Charles Ott</u>									
RR#, St. Address, Box #: <u>Route 1</u>									
City, State, ZIP Code: <u>Peck, KS 67120</u>									
Board of Agriculture, Division of Water Resources Application Number: <u>not available</u>									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>34</u> ft. ELEVATION: <u>UNKNOWN</u>							
		Depth(s) Groundwater Encountered 1. <u>10</u> ft. 2. <u>10</u> ft. 3. <u>10</u> ft.							
		WELL'S STATIC WATER LEVEL <u>10</u> ft. below land surface measured on mo/day/yr <u>3/16/81</u>							
		Pump test data: Well water was <u>800</u> gpm: Well water was <u>800</u> gpm							
		Bore Hole Diameter: <u>24</u> in. to <u>34</u> in. to <u>34</u> in. to <u>34</u> 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) <u>2 Irrigation</u> 4 Industrial 7 Lawn and garden only 10 Observation 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 No <u>X</u>									
5 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 <u>X</u> .....									
7 Fiberglass Threaded.....									
Blank casing diameter <u>16</u> in. to <u>14</u> ft., Dia. <u>14</u> in. to <u>14</u> ft., Dia. <u>14</u> in. to <u>14</u> ft.									
Casing height above land surface <u>12</u> in., weight <u>31.75</u> lbs./ft. Wall thickness or gauge No. <u>188</u>									
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) <u>Doerr Bridge Slot</u>									
SCREEN-PERFORATED INTERVALS: From <u>14</u> ft. to <u>34</u> ft., From <u>14</u> ft. to <u>34</u> ft., From <u>14</u> ft. to <u>34</u> ft.									
GRAVEL PACK INTERVALS: From <u>10</u> ft. to <u>34</u> ft., From <u>10</u> ft. to <u>34</u> ft., From <u>10</u> ft. to <u>34</u> ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other									
Grout Intervals: From <u>0</u> ft. to <u>10</u> ft., From <u>0</u> ft. to <u>10</u> ft., From <u>0</u> ft. to <u>10</u> 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 FIELD									
Direction from well? <u>ALL</u> How many feet? <u>N/A</u>									
LITHOLOGIC LOG									
FROM	TO	LITHOLOGIC LOG							
0	3	Topsoil							
3	11	Fine-med. sand & gravel w/thin clay streaks							
11	14	Fine-med sand							
14	18	Fine sand & gravel w/streaks gray clay 16-17 (Hit buried tree(s) @ 14-16')							
18	26	Fine-med sand & gravel w/some coarse							
26	30	Med-coarse sand & gravel w/thin streaks blue & gray clay							
30	33	Fine-med sand & gravel w/some coarse							
33	34	Blue & gray clay & 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>3/16/81</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>185</u> This Water Well Record was completed on (mo/day/yr) <u>6/26/81</u> under the business name of <u>CLARKE WELL &amp; EO., INC.</u> by (signature) <u>[Signature]</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.									