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|--|--|--|--|-------------------|-----------------|--|--|
| 1 LOCATION OF WATER WELL | | Fraction | Section Number | Township Number | Range Number | | |
| County: <u>Montgomery</u> | | <u>SE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ | <u>23</u> | T <u>31</u> S | R <u>13</u> E/W | | |
| Distance and direction from nearest town or city? <u>2 ms. N. of Elk City 160 Intersection, 2 ms. W, 3/4 m North</u> | | | Street address of well if located within city? | | | | |
| 2 WATER WELL OWNER: RR#, St. Address, Box # City, State, ZIP Code | | | Board of Agriculture, Division of Water Resources Application Number: | | | | |
| 3 DEPTH OF COMPLETED WELL: <u>50</u> ft. Bore Hole Diameter: <u>10</u> in. to <u>50</u> ft. and _____ in. to _____ ft. | | | | | | | |
| Well Water to be used as: | | 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 10 Observation well | | | | | |
| Well's static water level: <u>2 1/2</u> ft. below land surface measured on _____ month _____ day _____ 19 <u>80</u> year | | | | | | | |
| Pump Test Data: _____ Well water was _____ ft. after _____ hours pumping _____ gpm | | | | | | | |
| Est. Yield <u>2</u> gpm: _____ Well water was _____ ft. after _____ hours pumping _____ gpm | | | | | | | |
| 4 TYPE OF BLANK CASING USED: | | 5 Wrought iron 8 Concrete tile Casing Joints <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded 2 PVC 4 ABS 7 Fiberglass _____ Threaded | | | | | |
| Blank casing dia. <u>6</u> in. to <u>50</u> ft. Dia. _____ in. to _____ ft. Dia. _____ in. to _____ ft. | | | | | | | |
| Casing height above land surface: <u>12</u> in. weight _____ lbs./ft. Wall thickness or gauge No <u>SDR 21</u> | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | 7 PVC 10 Asbestos-cement 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) | | | | | |
| Screen or Perforation Openings Are: | | 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) | | | | | |
| Screen-Perforation Dia. <u>5/32</u> in. to <u>20</u> ft. Dia. _____ in. to _____ ft. Dia. _____ in. to _____ ft. | | | | | | | |
| Screen-Perforated Intervals: From <u>10</u> ft. to <u>14</u> ft. From _____ ft. to _____ ft. | | | | | | | |
| Gravel Pack Intervals: From <u>26</u> ft. to <u>40</u> ft. From _____ ft. to _____ ft. | | | | | | | |
| Gravel Pack Intervals: From <u>10</u> ft. to <u>50</u> ft. From _____ ft. to _____ ft. | | | | | | | |
| 5 GROUT MATERIAL: | | 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. | | | | | |
| What is the nearest source of possible contamination: | | 10 Fuel storage 14 Abandoned water well 1 Septic tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 15 Oil well/Gas well 2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 16 Other (specify below) 3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines | | | | | |
| Direction from well: <u>East</u> How many feet: <u>30</u> ? Water Well Disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | | | | | | | |
| If Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____ | | | | | | | |
| Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ 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 <u>Oct</u> month <u>3</u> day <u>1980</u> year | | | | | | | |
| and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>393</u> | | | | | | | |
| This Water Well Record was completed on <u>Oct</u> month <u>5</u> day <u>1980</u> year under the business name of <u>Country Water</u> by (signature) <u>Melvin Ray Weber</u> | | | | | | | |
| 7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | | FROM | | TO | | | |
| | | LITHOLOGIC LOG | | LITHOLOGIC LOG | | | |
| | | 0 2 | | Soil | | | |
| | | 2 5 | | Clay | | | |
| | | 5 8 | | Gravel | | | |
| | | 8 12 | | Yellow Sandy Clay | | | |
| | | 12 12 1/2 | | Sand Rock | | | |
| | | 12 1/2 17 1/2 | | Gray Shale | | | |
| 17 1/2 30 | | Gray Sand Rock | | | | | |
| 30 50 | | Gray Shale | | | | | |
| ELEVATION: | | | | | | | |
| Depth(s) Groundwater Encountered 1. <u>12 1/2</u> ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed) | | | | | | | |

OFFICE USE ONLY

T

31

R

13

EW

SEC

23

SE 1/4

NE 1/4

SE 1/4

1/4

SE 1/4