

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>Sumner</u>	<u>ne 1/4 se 1/4 se 1/4</u>	<u>13</u>	<u>T 33 S</u>	<u>R 2 E/W</u>

Distance and direction from nearest town or city? 6 mi s 1 mi e 3/4 mi s Oxford
 Street address of well if located within city?

2 WATER WELL OWNER: Norris Grade
 RR#, St. Address, Box #: RFD # 1
 City, State, ZIP Code: Oxford, Kansas 67119
 Board of Agriculture, Division of Water Resources
 Application Number:

3 DEPTH OF COMPLETED WELL: 55 ft. Bore Hole Diameter: 10 in. to 55 T.D. ft. and _____ in. to _____ ft.
 Well Water to be used as:
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well
 Well's static water level: 32 ft. below land surface measured on Oct month 5 day 1979 year
 Pump Test Data Bail test: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 10/12 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: 5 in. to 5.45 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface: 24 in., weight 2.8 lbs./ft. Wall thickness or gauge No sch 40
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 11 Other (specify)
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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: 5 in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 4.5 ft. to 55 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 15 ft. to 55 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 0 ft. to 15 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)
 13 Watertight sewer lines
 Direction from well: SW How many feet 250? Water Well Disinfected? Yes X No
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, date sample was submitted _____ month _____ day _____ year Pump Installed? Yes _____ No X
 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 Oct month 5 day 1979 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 171
 This Water Well Record was completed on oct month 6 day 1979 year under the business name of G&S Drilling by (signature)

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		LITHOLOGIC LOG	TO		LITHOLOGIC LOG
	FROM	TO		FROM	TO	
	0	5	Top soil			
	5	15	Red clay			
	15	22	sdv clay fine grain			
	22	28	sand fine to med			
	28	32	tan to grn shale soft			
	32	48	grn/blu shale soft some bkn slate (water)			
	48	49	hrd shale drk brn			
49	55	bright blu shale soft				
	55	T.D.	hrd lm wht.			

Depth(s) Groundwater Encountered 1. 32/35 ft. 2. _____ 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.

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