

1 LOCATION OF WATER WELL
 County: Montgomery Fraction SE 1/4 NE 1/4 SE 1/4 Section Number 4 Township Number T 34 S Range Number R 16 E

Distance and direction from nearest town or city? 2 1/2 m. N. of Coffeyville city limits
 Street address of well if located within city?

2 WATER WELL OWNER: Floyd Graham
 RR#, St. Address, Box #: 1806 W 6th Coffeyville Kan
 City, State, ZIP Code: 1806 W 6th Coffeyville Kan
 Board of Agriculture, Division of Water Resources
 Application Number:

3 DEPTH OF COMPLETED WELL: 160 ft. Bore Hole Diameter: 10 in. to 10 ft., and 6 in. to 160 ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Observation well 11 Injection well 12 Other (Specify below)
 Well's static water level: 60 ft. below land surface measured on Feb month 17 day 1981 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 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)
 2 PVC 4 ABS 7 Fiberglass
 Blank casing dia: 6 in. to 17 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 24 in., weight _____ lbs./ft. Wall thickness or gauge No. SDR 21

TYPE OF SCREEN OR PERFORATION MATERIAL:
 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:
 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 10 Other (specify) _____
 7 Torch cut
 Screen-Perforation Dia _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: 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 0 ft. to 10 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)
 17 None known
 Direction from well _____ How many feet _____ ? Water Well Disinfected Yes No
 Was a chemical/bacteriological sample submitted to Department? Yes No No If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes No No
 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 Feb month 16 day 1981 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 3933
 This Water Well Record was completed on Feb month 17 day 1981 year under the business name of Country Water by (signature) Melvin Ray Weber

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	1	Soil			
	1	5	Sandy lime			
	5	15	Lime			
	15	37	limy shale			
	37	46	Shale			
	46	50	Lime			
	50	52	Gray Shale			
	52	55	Lime			
	55	160	Gray Shale			

ELEVATION:
 Depth(s) Groundwater Encountered 1... 37 ft. 2... 77 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.

OFFICE USE ONLY
T 34
R 16
SEC
SE 1/4
NE 1/4
SW 1/4
SE 1/4