

LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: WASHINGTON	NE 1/4 NE 1/4 NE 1/4	8	T 4 S	R 4E
Distance and direction from nearest town or city? 1/2 WEST GREENLEAF		Street address of well if located within city?		

WATER WELL OWNER:

R#, St. Address, Box #: **KENNETH WURTE**

City, State, ZIP Code: **GREENLEAF, KANSAS 66943**

Board of Agriculture, Division of Water Resources

Application Number:

DEPTH OF COMPLETED WELL: **100** ft. Bore Hole Diameter: **10** in. to **72** ft. and **8** in. to **100** ft.

Well Water to be used as:

1 Domestic	3 Feedlot	5 Public water supply	8 Air conditioning	11 Injection well
2 Irrigation	4 Industrial	6 Oil field water supply	9 Dewatering	12 Other (Specify below)
7 Lawn and garden only		10 Observation well		

Well's static water level: **40** ft. below land surface measured on **X** **12** month **X** **27** day **79** year

Pump Test Data: Well water was **NA** ft. after **NA** hours pumping. **NA** gpm

St. Yield: **40** gpm: Well water was **NA** ft. after **NA** hours pumping. **NA** gpm

TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	Casing Joints: Glued X Clamped
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded X
7 Fiberglass		Threaded		

Blank casing dia: **8** in. to **72** ft. Dia **5** in. to **80** ft. Dia **10** in. to **100** ft.

Casing height above land surface: **24** in. weight **STEEL 19#PK 3** lbs./ft. Wall thickness or gauge No. **258**

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)		11 None (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 **100** ft. Dia **80** ft. Dia **100** ft. Dia **100** ft.

Screen-Perforated Intervals: From **80** ft. to **100** ft. From **100** ft. to **100** ft. From **100** ft. to **100** ft.

Gravel Pack Intervals: From **10** ft. to **100** ft. From **100** ft. to **100** ft. From **100** ft. to **100** ft.

GROUT MATERIAL: **1 Neat cement** 2 Cement grout 3 Bentonite 4 Other

Grouted Intervals: From **0** ft. to **10** ft. From **10** ft. to **10** ft. From **10** ft. to **10** ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Cess pool	7 Sewage lagoon	11 Fertilizer storage	14 Abandoned water well
2 Sewer lines	5 Seepage pit	8 Feed yard	12 Insecticide storage	15 Oil well/Gas well
3 Lateral lines	6 Pit privy	9 Livestock pens	13 Watertight sewer lines	16 Other (specify below)

Direction from well: **EAST** How many feet: **100** ? Water Well Disinfected **X** Yes **X** No

Has a chemical/bacteriological sample submitted to Department? Yes **X** No **X** If yes, date sample submitted **12** month **14** day **1979** year

Yes: Pump Manufacturer's name: **DARYL COX + SONS INC** Model No. **359** HP **28** Volts **1979**

Depth of Pump Intake: **12** ft. Pumps Capacity rated at **28** gal./min.

Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was **(1) constructed** (2) reconstructed, or (3) plugged under my jurisdiction and was completed on **12** month **14** day **1979** year

and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **359**

This Water Well Record was completed on **12** month **28** day **1979** year under the business name of **DARYL COX + SONS INC** by (signature) **Daryl Cox**

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		LITHOLOGIC LOG		LITHOLOGIC LOG	
FROM	TO	FROM	TO	FROM	TO
0	3				
3	10				
10	25				
25	29				
29	63				
63	67				
67	72				
72	79				
79	94				
94	100				
100					

LITHOLOGIC LOG: **TOPSOIL**
BROWN CLAY
GRAVEL (DEY)
GRAY CLAY
BLUE CLAY
SANDROCK (SOFT)
BLUE CLAY
LIMESTONE
LIMESTONE w/ BLUE CLAY LAYERS
LIMESTONE w/ RED CLAY LAYERS
STOP

LEVATION: **1370**

Depth(s) Groundwater Encountered: **1** **65** ft. **2** **74** ft. **3** **74** ft. **4** **74** ft.

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

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R

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CEW

SEC.

NE 1/4 NE 1/4 NE 1/4