

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: <u>WASHINGTON</u>		<u>NW 1/4 NW 1/4 NW 1/4</u>	<u>2</u>	<u>T 5 S</u>	<u>R 4 E</u>		
Distance and direction from nearest town or city? <u>3 1/2 mile W 4 MILES South of BARNES</u>			Street address of well if located within city?				
2 WATER WELL OWNER: <u>ERNEST BLANKEN</u>							
RR#, St. Address, Box #: <u>GREEN LEAF KANSAS 66943</u>							
City, State, ZIP Code: _____ Board of Agriculture, Division of Water Resources Application Number: _____							
3 DEPTH OF COMPLETED WELL: <u>100</u> ft. Bore Hole Diameter: <u>8</u> in. to _____ ft. and _____ in. to _____ ft.							
Well Water to be used as:							
☒ Domestic		5 Public water supply		8 Air conditioning			
☐ 3 Feedlot		6 Oil field water supply		11 Injection well			
☐ 2 Irrigation		7 Lawn and garden only		12 Other (Specify below)			
☐ 4 Industrial		10 Observation well					
Well's static water level: <u>65</u> ft. below land surface measured on _____ month _____ day _____ year							
Pump Test Data: _____ Well water was _____ ft. after _____ hours pumping _____ gpm							
Est. Yield <u>4-5</u> gpm: _____ Well water was _____ ft. after _____ hours pumping _____ gpm							
4 TYPE OF BLANK CASING USED:							
1 Steel		5 Wrought iron		8 Concrete tile			
3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below)			
<u>2 PVC</u>		7 Fiberglass		Casing Joints: Glued ☒ Clamped _____			
4 ABS				Welded _____			
				Threaded _____			
Blank casing dia: <u>5</u> in. to <u>60</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.							
Casing height above land surface: <u>24</u> in., weight <u>200</u> lbs./ft. Wall thickness or gauge No _____							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel		5 Fiberglass			
2 Brass		4 Galvanized steel		8 RMP (SR)			
		6 Concrete tile		9 ABS			
				10 Asbestos-cement			
				11 Other (specify) _____			
				12 None used (open hole)			
Screen or Perforation Openings Are:							
1 Continuous slot		3 Mill slot		5 Gauzed wrapped			
2 Louvered shutter		4 Key punched		6 Wire wrapped			
				7 Torch cut			
				8 Saw cut			
				9 Drilled holes			
				10 Other (specify) _____			
Screen-Perforation Dia: <u>5</u> in. to <u>80</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.							
Screen-Perforated Intervals: From <u>60</u> ft. to <u>80</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
Gravel Pack Intervals: From <u>60</u> ft. to <u>100</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
5 GROUT MATERIAL:							
1 Neat cement		2 Cement grout		<u>3 Bentonite</u>			
4 Other							
Grouted Intervals: From <u>0</u> ft. to <u>60</u> 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			
2 Sewer lines		5 Seepage pit		8 Feed yard			
3 Lateral lines		6 Pit privy		9 Livestock pens			
				10 Fuel storage			
				11 Fertilizer storage			
				12 Insecticide storage			
				13 Watertight sewer lines			
				14 Abandoned water well			
				15 Oil well/Gas well			
				16 Other (specify below)			
Direction from well: <u>WEST</u> How many feet: <u>65</u> ? Water Well Disinfected? Yes ☒ No _____							
Was a chemical/bacteriological sample submitted to Department? Yes _____ No ☒ If yes, date sample _____							
If Yes: Pump Manufacturer's name: <u>SUBMERSABLE</u> Model No. <u>IDEJOS</u> HP _____ Volts <u>110</u>							
Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ gal./min.							
Type of pump: ☒ Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other							
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on <u>12-2-88</u> month _____ day _____ year							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>2345</u>							
This Water Well Record was completed on <u>1-22-89</u> month _____ day _____ year under the business name of <u>STRADERS BLUE VALLEY DRILLING</u> by (signature) <u>Boyd J. Strader</u>							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		<u>0</u>	<u>7</u>	<u>BROWN CLAY</u>	<u>130</u>	<u>135</u>	<u>Gypsum</u>
		<u>7</u>	<u>12</u>	<u>TAN CLAY</u>			
		<u>12</u>	<u>13</u>	<u>LIMESTONE</u>			
		<u>13</u>	<u>16</u>	<u>TAN CLAY</u>			
		<u>16</u>	<u>17</u>	<u>LIMESTONE</u>			
		<u>17</u>	<u>47</u>	<u>Light Blue Clay</u>			
		<u>47</u>	<u>54</u>	<u>Yellow Clay</u>			
		<u>54</u>	<u>58</u>	<u>Red Clay</u>			
		<u>58</u>	<u>65</u>	<u>Yellow Clay</u>			
		<u>65</u>	<u>114</u>	<u>GRAY Shale</u>			
ELEVATION:		<u>114</u>	<u>130</u>	<u>Red Shale</u>			
Depth(s) Groundwater Encountered 1. _____ 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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