

LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Clay</u>	NW 1/4 NE 1/4 NW 1/4	<u>24</u>	T 6 S	R 1 <u>EW</u>

Distance and direction from nearest town or city street address of well if located within city?

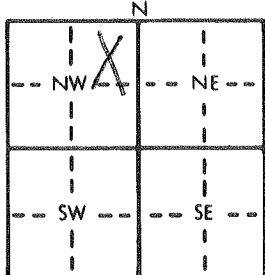
3 miles south 1/2 mile east of Clifton, KS

WATER WELL OWNER: Friedrich Meenen  
RR#, St. Address, Box #: Rt. 2  
City, State, ZIP Code: Clifton, KS 66937

Board of Agriculture, Division of Water Resources

Application Number: 39841

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: 71 ft. ELEVATION: .....  
Depth(s) Groundwater Encountered 1. 25 ft. 2. .... ft. 3. .... ft.  
WELL'S STATIC WATER LEVEL 25 ft. below land surface measured on mo/day/yr 6-12-90  
Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
Est. Yield 1500 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm  
Bore Hole Diameter: 30 in. to 71 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 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well  
Was a chemical/bacteriological sample submitted to Department? Yes.....No.....X...; If yes, mo/day/yr sample was submitted  
Water Well Disinfected? Yes X No

5 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 .....  
Blank casing diameter 16 in. to 41 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
Casing height above land surface: 12 in., weight 19.75 lbs./ft. Wall thickness or gauge No. 616

TYPE OF SCREEN OR PERFORATION MATERIAL:  
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement  
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) .....  
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-PERFORATED INTERVALS: From 41 ft. to 71 ft., From ..... ft. to ..... ft.  
From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
GRAVEL PACK INTERVALS: From 20 ft. to 71 ft., From ..... ft. to ..... ft.  
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....  
Grout Intervals: From 0 ft. to 20 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
What is the nearest source of possible contamination:  
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well  
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well  
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)  
13 Insecticide storage N/A

Direction from well?			How many feet?		
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	4	topsoil			
4	23	clay			
23	25	sand			
25	38	gravel			
38	41	sand			
41	52	gravel			
52	55	sand			
55	68	gravel			
68	71	sand			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) 6-12-90 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 361 This Water Well Record was completed on (mo/day/yr) 6/11/90 under the business name of Cox-Beswick Irrigation Service, Inc. by (signature) Denise Beswick

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, Bureau of Water Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.