

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: PLATT	SW 1/4 SE 1/4 NE 1/4	21	T 6 S	R 46 EW

Distance and direction from nearest town or city? 5 3/4 W. of Randolph Mo. Street address of well if located within city?

2 WATER WELL OWNER: ALBERT ROEPKE
 RR# 106 Address, Box # 106 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Randolph Kansas 66554 Application Number:

3 DEPTH OF COMPLETED WELL: 72 ft. Bore Hole Diameter: 7 1/2 in. to 7 1/2 ft., and 10 in. to 14 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: 32 ft. below land surface measured on 4 month 29 day 81 year
 Pump Test Data: Well water was 20 ft. after 2 hours pumping 8 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 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 4 1/2 in. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface: 14 in., weight Sch 40 lbs./ft. Wall thickness or gauge No. 0.280
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 8 RMP (SR) 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____
 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 7 1/2 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 4 1/2 ft. to 7 1/2 ft. From _____ ft. to _____ ft.
 From 14 ft. to 72 ft. From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 14 ft. to 72 ft. 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 4 ft. to 14 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: W How many feet: 50 ? Water Well Disinfected? Yes _____ No _____
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____ If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No _____
 If Yes: Pump Manufacturer's name: Starite Model No: MS4301E-03HP Volts: 230
 Depth of Pump Intake: 68 ft. Pumps Capacity rated at: 10 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 _____ month _____ day _____ year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 176
 This Water Well Record was completed on _____ month _____ day _____ year under the business name of Harpers Drlg. Serv. by (signature) G. O. Harper

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	15	Clay Brown			
15	25	yellow			
25	30	lime Rock White			
30	35	" "			
35	40	Clay yellow			
40	45	lime Rock White			
45	50	" "			
50	60	scale Blue			
60	72	" "			

ELEVATION:

Depth(s) Groundwater Encountered 1. 42 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.

OFFICE USE ONLY
T
6
EW
SEC.
SW 1/4
SE 1/4
NE 1/4