

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Pott</u>		<u>NE 1/4 NE 1/4 SE 1/4</u>	<u>5</u>	<u>T 7 S</u>	<u>R 7 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>From Olsburg Go 2.5 miles west on 16 To Burkland Ravine Rd + Go 2.5 miles North West To Rolander Road + Go North East 2 mi.</u>					
2 WATER WELL OWNER: <u>Richard Robbins</u>					
RR#, St. Address, Box #: <u>RR #1 Box 10</u>					
City, State, ZIP Code: <u>Belvidere, KS 67015</u>					
Board of Agriculture, Division of Water Resources					
Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>100'</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>74</u> ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>50</u> ft. below land surface measured on mo/day/yr			
		Pump test data: Well water was ft. after hours pumping gpm			
		Est. Yield <u>75</u> gpm: Well water was ft. after hours pumping gpm			
		Bore Hole Diameter <u>9</u> in. to <u>100'</u> ft. and in. to ft.			
		WELL WATER TO BE USED AS:			
		<input checked="" type="checkbox"/> Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) <input type="checkbox"/> Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well			
		Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? <input checked="" type="checkbox"/> Yes No			
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: <input checked="" type="checkbox"/> Glued <input checked="" type="checkbox"/> Clamped 2 <u>PVC</u> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded <u>Ground</u> Blank casing diameter <u>5</u> in. to <u>80</u> ft. Dia. in. to ft. Dia. in. to ft.					
Casing height above land surface <u>2</u> in., weight <u>56.40</u> lbs./ft. Wall thickness or gauge No.					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass 7 <u>PVC</u> 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) SCREEN OR PERFORATION OPENINGS ARE: <u>25</u> <u>1900's</u> 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot 3 <u>Mill slot</u> 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)					
SCREEN-PERFORATED INTERVALS: From <u>80</u> ft. to <u>100</u> ft. From ft. to ft. From ft. to ft.					
GRAVEL PACK INTERVALS: From <u>25</u> ft. to <u>100</u> ft. From ft. to ft. From ft. to ft.					
6 GROUT MATERIAL:					
1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other Grout Intervals: From <u>0</u> ft. to <u>25</u> ft. From ft. to ft. From ft. to ft.					
What is the nearest source of possible contamination:					
1 Septic tank 4 <u>Lateral lines</u> 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					
Direction from well? <u>West</u> How many feet? <u>300'</u>					
FROM TO LITHOLOGIC LOG			FROM TO PLUGGING INTERVALS		
0	9	Brown Clay	87	91	Limestone
9	11	Limestone	91	93	Brown shale
11	13	Yellow Shale	93	100	Limestone
13	25	Greenish Shale			
25	34	Yellow Shale			
34	38	Limestone			
38	46	Grey Shale			
46	51	Yellow Shale			
51	62	Brown Shale			
62	65	Limestone			
65	67	Brown Shale			
67	68	Limestone			
68	74	Brown Shale			
74	83	Limestone (Water)			
83	87	Brown Shale			
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/year) <u>8/5/91</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>451</u> This Water Well Record was completed on (mo/day/yr) <u>8/14/91</u> under the business name of <u>Baldman Well Drilling</u> by (signature) <u>Craig N. Caldwell</u>					
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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					