

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>POT</u>		<u>SE 1/4 SW 1/4 NW 1/4</u>	<u>30</u>	<u>T 7 S</u>	<u>R 9 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>From Westmoreland go west on the</u> <u>Westmoreland Rd. 2 3/4 miles & North in Driveway 1/2 mile</u>					
2 WATER WELL OWNER: <u>John Allen</u>					
RR#, St. Address, Box # : <u>P.O. Box 342</u>					
City, State, ZIP Code : <u>Ogden, KS 66517</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>102</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered <u>1</u> ft. 2 <u>29</u> ft. 3 <u>102</u> ft.			
		WELL'S STATIC WATER LEVEL <u>29</u> ft. below land surface measured on mo/day/yr			
		Pump test data: Well water was <u>1</u> ft. after <u>1</u> hours pumping <u>1</u> gpm			
		Est. Yield <u>1</u> gpm: Well water was <u>1</u> ft. after <u>1</u> hours pumping <u>1</u> gpm			
WELL WATER TO BE USED AS:					
<input checked="" type="checkbox"/> 1 Domestic <input type="checkbox"/> 3 Feedlot <input type="checkbox"/> 6 Oil field water supply <input type="checkbox"/> 9 Dewatering <input type="checkbox"/> 12 Other (Specify below) <input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 4 Industrial <input type="checkbox"/> 7 Domestic (lawn & garden) <input type="checkbox"/> 10 Monitoring well					
Was a chemical/bacteriological sample submitted to Department? Yes <u>Yes</u> No <u>No</u> ; If yes, mo/day/yr sample was submitted					
Water Well Disinfected? <u>Yes</u> No <u>No</u>					
5 TYPE OF BLANK CASING USED:					
<input checked="" type="checkbox"/> 1 Steel <input type="checkbox"/> 3 RMP (SR) <input type="checkbox"/> 5 Wrought iron <input type="checkbox"/> 8 Concrete tile CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input checked="" type="checkbox"/> 2 PVC <input type="checkbox"/> 4 ABS <input type="checkbox"/> 6 Asbestos-Cement <input type="checkbox"/> 9 Other (specify below) <input type="checkbox"/> Welded <input type="checkbox"/> Blank casing diameter <u>5</u> in. to <u>82</u> ft., Dia <u>82</u> in. to <u>102</u> ft., Dia <u>102</u> in. to <u>102</u> ft. <input type="checkbox"/> Threaded					
Casing height above land surface <u>2</u> in., weight <u>SCH 40</u> lbs./ft. Wall thickness or gauge No. <u>10</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
<input type="checkbox"/> 1 Steel <input type="checkbox"/> 3 Stainless Steel <input type="checkbox"/> 5 Fiberglass <input checked="" type="checkbox"/> 7 PVC <input type="checkbox"/> 10 Asbestos-Cement <input type="checkbox"/> 2 Brass <input type="checkbox"/> 4 Galvanized Steel <input type="checkbox"/> 6 Concrete tile <input type="checkbox"/> 8 RMP (SR) <input type="checkbox"/> 11 Other (Specify) <input type="checkbox"/> 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
<input type="checkbox"/> 1 Continuous slot <input checked="" type="checkbox"/> 3 Mill slot <input type="checkbox"/> 5 Gauzed wrapped <input type="checkbox"/> 8 Saw cut <input type="checkbox"/> 11 None (open hole) <input type="checkbox"/> 2 Louvered shutter <input type="checkbox"/> 4 Key punched <input type="checkbox"/> 6 Wire wrapped <input type="checkbox"/> 9 Drilled holes <input type="checkbox"/> 7 Torch cut <input type="checkbox"/> 10 Other (specify)					
SCREEN-PERFORATED INTERVALS: From <u>82</u> ft. to <u>102</u> ft., From <u>102</u> ft. to <u>102</u> ft.					
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>102</u> ft., From <u>102</u> ft. to <u>102</u> ft.					
6 GROUT MATERIAL: <input type="checkbox"/> 1 Neat cement <input type="checkbox"/> 2 Cement grout <input checked="" type="checkbox"/> 3 Bentonite <input type="checkbox"/> 4 Other					
Grout intervals: From <u>0</u> ft. to <u>20</u> ft., From <u>20</u> ft. to <u>102</u> ft., From <u>102</u> ft. to <u>102</u> ft.					
What is the nearest source of possible contamination:					
<input type="checkbox"/> 1 Septic tank <input type="checkbox"/> 4 Lateral lines <input type="checkbox"/> 7 Pit privy <input type="checkbox"/> 10 Livestock pens <input type="checkbox"/> 14 Abandoned water well <input type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 5 Cess pool <input type="checkbox"/> 8 Sewage lagoon <input type="checkbox"/> 11 Fuel storage <input type="checkbox"/> 15 Oil well/Gas well <input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 9 Feedyard <input type="checkbox"/> 12 Fertilizer storage <input type="checkbox"/> 16 Other (specify below) <input type="checkbox"/> 13 Insecticide storage					
Direction from well? <u>None Close</u> How many feet? <u>102</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>1</u>	<u>Top Soil</u>			
<u>1</u>	<u>3</u>	<u>Brown Clay</u>			
<u>3</u>	<u>10</u>	<u>Limestone</u>			
<u>10</u>	<u>17</u>	<u>Yellow Shale</u>			
<u>17</u>	<u>19</u>	<u>Limestone</u>			
<u>19</u>	<u>27</u>	<u>Brown Shale</u>			
<u>27</u>	<u>52</u>	<u>Limestone</u>			
<u>52</u>	<u>59</u>	<u>Grey Shale</u>			
<u>59</u>	<u>64</u>	<u>Greenish Shale</u>			
<u>64</u>	<u>84</u>	<u>Grey Oily Shale</u>			
<u>84</u>	<u>95</u>	<u>Limestone</u>			
<u>95</u>	<u>102</u>	<u>Grey Oily Shale</u>			
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>11 / 26 / 2004</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No <u>451</u> This Water Well Record was completed on (mo/day/yr) <u>11 / 26 / 2004</u> under the business name of <u>Hal Decker Well Drilling</u> by (signature) <u>Craig Decker</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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.					