

LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Clay	NESE 1/4 NE 1/4 SE 1/4	* 8	T 9 S	R 1 E

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

2 1/2 North Oakhill

WATER WELL OWNER: **Lawrence Bostick**
 R#, St. Address, Box # : **Route 1**
 City, State, ZIP Code : **Oakhill, Kansas 67472**
 Board of Agriculture, Division of Water Resources
 Application Number:

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

N			
W	---	---	E
	NW	NE	
	---	---	
	SW	SE	X
	---	---	
	S		

DEPTH OF COMPLETED WELL: **120** ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. **100** ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL **80** ft. below land surface measured on mo/day/yr **7/5/82**
 Pump test data: Well water was **NA** ft. after _____ hours pumping _____ gpm
 Est. Yield **10** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter **8** in. to _____ ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 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 _____; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes No _____

TYPE OF BLANK CASING USED:

5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
1 Steel	3 RMP (SR)	Welded _____
<input checked="" type="checkbox"/> 2 PVC	4 ABS	Threaded _____
6 Asbestos-Cement	9 Other (specify below)	
7 Fiberglass		

Blank casing diameter **5** in. to **100** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **12** in., weight **3** lbs./ft. Wall thickness or gauge No. **258**

TYPE OF SCREEN OR PERFORATION MATERIAL:

<input checked="" type="checkbox"/> 7 PVC	10 Asbestos-cement
1 Steel	3 Stainless steel
2 Brass	4 Galvanized steel
5 Fiberglass	6 Concrete tile
8 RMP (SR)	9 ABS
11 Other (specify)	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

5 Gauzed wrapped	<input checked="" type="checkbox"/> 8 Saw cut	11 None (open hole)
1 Continuous slot	3 Mill slot	6 Wire wrapped
2 Louvered shutter	4 Key punched	7 Torch cut
		10 Other (specify)

SCREEN-PERFORATED INTERVALS: From **100** ft. to **120** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **10** ft. to **120** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From **0** ft. to **10** 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	<input checked="" type="checkbox"/> 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? **West** How many feet? **50**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	4	topsoil			
4	9	brown clay			
9	31	blue clay			
31	50	sandrock			
50	63	blue clay			
63	75	red clay			
75	100	blue clay w/ sandrock layers			
100	104	hard rock			
104	117	sandrock			
117	120	blue shale			
120		stop			

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **7/5/82** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **359**. This Water Well Record was completed on (mo/day/yr) **7/20/82** by the business name of **Daryl Cox & Sons Inc.** by (signature) *Daryl Cox*

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, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.