

LOCATION OF WATER WELL:	Fraction NE ¼ NW ¼ SW ¼	Section Number 8	Township Number T 9 S	Range Number R 3 E (EW)
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County: **Clay**
 Distance and direction from nearest town or city street address of well if located within city?

5 ½ miles South of Clay Center

WATER WELL OWNER: **Lester Luthi**
 R#, St. Address, Box #: **Route 2**
 City, State, ZIP Code: **Clay Center, KS 67432**

Board of Agriculture, Division of Water Resources
 Application Number:

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	N	4	DEPTH OF COMPLETED WELL... 78' ft. ELEVATION:							
<table border="1" style="margin: auto;"> <tr><td style="text-align: center;">NW</td><td style="text-align: center;">NE</td></tr> <tr><td style="text-align: center;">X</td><td style="text-align: center;">SE</td></tr> <tr><td style="text-align: center;">SW</td><td style="text-align: center;">SE</td></tr> </table>	NW	NE	X	SE	SW	SE	1	Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.		
	NW	NE								
	X	SE								
	SW	SE								
WELL'S STATIC WATER LEVEL ... 50' ft. below land surface measured on mo/day/yr 8-12-86										
Pump test data: Well water was 78 ft. after 3/4 hours pumping 13 gpm										
Est. Yield 12-15 gpm: Well water was ft. after hours pumping gpm										
Bore Hole Diameter ... 8" in. to 78' 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						
		2 Irrigation	4 Industrial	7 Lawn and garden only						
			9 Dewatering	12 Other (Specify below)						
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										

TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued X Clamped
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
2 PVC	4 ABS	7 Fiberglass	10 Asbestos-cement
Blank casing diameter ... 5" in. to ... 80 ft., Dia ... in. to ... ft., Dia ... in. to ... ft.			11 Other (specify)
Casing height above land surface ... 12 in., weight ... 3 lbs./ft. Wall thickness or gauge No. ... 258			12 None used (open hole)
TYPE OF SCREEN OR PERFORATION MATERIAL:	5 Fiberglass	8 RMP (SR)	11 Other (specify)
1 Steel	3 Stainless steel	9 ABS	12 None used (open hole)
2 Brass	4 Galvanized steel	6 Concrete tile	
SCREEN OR PERFORATION OPENINGS ARE:	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify)
SCREEN-PERFORATED INTERVALS:	From ... 80 ft. to ... 90 ft., From ... ft. to ... ft.		
	From ... ft. to ... ft., From ... ft. to ... ft.		
GRAVEL PACK INTERVALS:	From ... 10 ft. to ... 90 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.				
What is the nearest source of possible contamination:	NONE	10 Livestock pens	14 Abandoned water well	
1 Septic tank	4 Lateral lines	7 Pit privy	11 Fuel storage	15 Oil well/Gas well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	16 Other (specify below)
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage	

Direction from well?		LITHOLOGIC LOG		LITHOLOGIC LOG	
FROM	TO		FROM	TO	
0	2	Topsoil			
2	46	Clay			
46	78	Limerock			

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) **August 12, 1986** 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) **March 12, 1987**
 Under the business name of **Cox-Beswick Irrigation Service, Inc.** by (signature) *Francis 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.