

**1 LOCATION OF WATER WELL:**  
 County: Brooks Fraction SE 1/4 NW 1/4 SW 1/4 Section Number 22 Township Number T10 S17 Range Number R EW  
 Distance and direction from nearest town or city street address of well if located within city? 5 east 5 south of Plainville **Global Positioning Systems** (decimal degrees, min. of 4 digits)  
 Latitude: \_\_\_\_\_  
 Longitude: \_\_\_\_\_  
 Elevation: \_\_\_\_\_  
 Datum: \_\_\_\_\_  
 Data Collection Method: \_\_\_\_\_

**2 WATER WELL OWNER:**  
 RR#, St. Address, Box # : Alvin Schrandt  
 City, State, ZIP Code : 1965 Hiway 18  
Plainville KS 67663

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

N	
--NW--	--NE--
--SW--	--SE--
S	

**4 DEPTH OF COMPLETED WELL ..... ft.**  
 Depth(s) Groundwater Encountered (1) 75 ..... ft. (2) ..... ft. (3) ..... ft.  
 WELL'S STATIC WATER LEVEL 73 ..... ft. below land surface measured on mo/day/yr. ....  
 Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield 10 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm  
**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 9 Dewatering 12 Other (Specify below)  
 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well  
 Was a chemical/bacteriological sample submitted to Department? Yes ..... No  .....; If yes, mo/day/yr Sample was submitted ..... Water well disinfected? Yes  No .....

**5 TYPE OF CASING USED:** 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued  Clamped .....  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....  
2 PVC 4 ABS 7 Fiberglass ..... Threaded .....  
 Blank casing diameter 5 ..... in. to 72 ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface ..... in., Weight ..... lbs./ft. Wall thickness or gauge No. ....  
**TYPE OF SCREEN OR PERFORATION MATERIAL:**  
 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) .....  
 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)  
**SCREEN OR PERFORATION OPENINGS ARE:**  
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  
 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) .....  
**SCREEN-PERFORATED INTERVALS:** From 72 ..... ft. to 72 ..... ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
**GRAVEL PACK INTERVALS:** From 72 ..... ft. to 40 ..... ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**6 GROUT MATERIAL:** 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....  
 Grout Intervals: From 39 ..... ft. to 0 ..... 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 10 Livestock pens 13 Insecticide Storage 16 Other (specify below)  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well  
 Direction from well? NW How many feet? 1/2 mile

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	4	Topsoil			
5	40	clay w/ limestone			
41	48	limestone			
49	64	clay			
65	72	sandstone			
73	78	clay			
79	83	sandstone			
84	90	sand			
91	92	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) 9/15/07 and this record is true to the best of my knowledge and belief.  
 Kansas Water Well Contractor's License No. 767 This Water Well Record was completed on (mo/day/year) 9/18/07  
 under the business name of Mid Ks Water Well by (signature) Ken Kyle

**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. Visit us at <http://www.kdhe.state.ks.us/geo/waterwells>.