

1 LOCATION OF WATER WELL: County: Logan	Fraction SW 1/4 SW 1/4 SE 1/4	Section Number 1	Township Number T 11 S	Range Number R 35 W EW
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Distance and direction from nearest town or city street address of well if located within city?  
N/A - LOCATION CONFIRMED BY GMD #4

2 WATER WELL OWNER: Milan; Mark & Maxine Berry  
RR#, St. Address, Box #: c/o Maxine Berry  
City, State, ZIP Code: Monument, KS 67747  
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: 205 ft. ELEVATION: ..... ft.  
Depth(s) Groundwater Encountered: 157 ft. 2. .... ft. 3. .... ft.  
WELL'S STATIC WATER LEVEL: 157 ft. below land surface measured on mo/day/yr .....  
Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm  
Bore Hole Diameter: ..... in. to ..... 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 9 Dewatering 12 Other (Specify below)  
X2 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? Yes No

5 TYPE OF BLANK CASING USED:  
X1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ..... Clamped .....  
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded .....  
7 Fiberglass ..... Threaded.....  
Blank casing diameter ..... in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
Casing height above land surface: 0 ..... in., weight ..... lbs./ft. Wall thickness or gauge No. ....  
TYPE OF SCREEN OR PERFORATION MATERIAL:  
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) .....  
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)  
SCREEN OR PERFORATION OPENINGS ARE:  
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)  
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes  
7 Torch cut 10 Other (specify) .....  
SCREEN-PERFORATED INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
GRAVEL PACK INTERVALS: From ..... ft. to ..... 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 ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
What is the nearest source of possible contamination: 0  
1 Septic tank 4 Lateral lines 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? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
	ENTER				pad poured - pipe 4 1/2"
					extends 3 1/2' above ground
					capped - extends 3' into
					casing welded to steel
					plate - 24"x24" - cap
					poured over plate
					3"x3"x4"

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) 2/14/90 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/yr) under the business name of by (signature) Milan Berry

OFFICE USE ONLY  
T  
R  
EW  
SEC  
1/4  
1/4  
1/4