

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Russell</u>	<u>SW 1/4 SW 1/4 SW 1/4</u>	<u>11</u>	<u>T 13 S</u>	<u>R 14 E/W</u>

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

1 1/2 north of Russell, Ks.

2 WATER WELL OWNER:	Chet Loving Rt. 2	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # :	Russell, Ks. 67665	Application Number:
City, State, ZIP Code :		

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>233</u> ft. ELEVATION: _____ ft.
	Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
	WELL'S STATIC WATER LEVEL <u>209</u> ft. below land surface measured on mo/day/yr <u>9-9-92</u>
	Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
	Est. Yield <u>na</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
	Bore Hole Diameter <u>10</u> in. to <u>233</u> 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)	
2 Irrigation      4 Industrial      7 Lawn and garden only      10 Monitoring well <u>windmill well</u>	
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> _____; If yes, mo/day/yr sample was submitted _____	
Water Well Disinfected? Yes <u>hth</u> No _____	

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped _____
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below) _____
<u>2 PVC</u>	4 ABS	7 Fiberglass	Welded _____
Blank casing diameter <u>5</u> in. to <u>193</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.			Threaded _____
Casing height above land surface <u>2</u> in., weight _____ SDR: <u>21</u> lbs./ft. Wall thickness or gauge No. _____			
TYPE OF SCREEN OR PERFORATION MATERIAL:			
1 Steel	3 Stainless steel	5 Fiberglass	7 PVC
2 Brass	4 Galvanized steel	6 Concrete tile	8 RMP (SR)
			10 Asbestos-cement
			11 Other (specify) _____
			12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:			
1 Continuous slot	3 Mill slot	5 Gauzed wrapped	8 Saw cut
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes
		7 Torch cut	11 None (open hole)
			10 Other (specify) _____
SCREEN-PERFORATED INTERVALS: From <u>193</u> ft. to <u>233</u> ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>233</u> ft., From _____ ft. to _____ ft.			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other <u>hole plug</u>
Grout Intervals: From <u>0</u> ft. to <u>20</u> 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	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? <u>west</u>				How many feet? <u>300</u>

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top soil			
3	10	Brown clay			
10	32	White clay with rock			
32	128	Shale			
128	143	Shale, hard rock			
143	147	Shale			
147	163	Good sand rock			
163	167	Shale with gray clay			
167	175	Sand rock w/ shale			
175	189	Shale, gray clay, hard rock			
189	195	Gray and white clay streaks sand rock			
195	209	Sand rock			
209	230	Sand rock, gray clay			
230	235	Shale			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>9-14-92</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>134</u> . This Water Well Record was completed on (mo/day/yr) <u>10-6-92</u> under the business name of <u>Rosencrantz-Bemis</u> by (signature) <u>Fredia Hodson</u>
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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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.