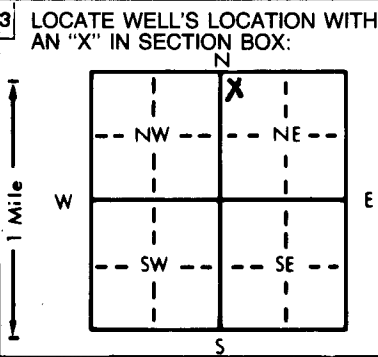


1 LOCATION OF WATER WELL: County: **RUSSELL** Fraction: **NE 1/4 NW 1/4 NW 1/4** Section Number: **7** Township Number: **T 14 S** Range Number: **R 11 EW**

Distance and direction from nearest town or city street address of well if located within city?
1/2 mile north of Dorrance

2 WATER WELL OWNER: **ROBERT BOATRIGHT**
 RR#, St. Address, Box #: _____ Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **DORRANCE, KANSAS 67634** Application Number: _____



4 DEPTH OF COMPLETED WELL: ~~158~~ **175** ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. **158** ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL **140** ft. below land surface measured on mo/day/yr **Jan. 25, 1983**
 Pump test data: Well water was ~~158~~ **140** ft. after **1** hours pumping **bailing** gpm
 Est. Yield **30** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter **8** in. to **175** 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 Observation well
 Was a chemical/bacteriological sample submitted to Department? Yes ~~_____~~ **No**; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes **XX** No

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ~~XXX~~ Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing diameter **5** in. to **145** ft., Dia **18** in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface _____ in., weight **2.82** lbs./ft. Wall thickness or gauge No. **.265**
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 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 **145** ft. to **175** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **143** ft. to **175** 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 **5** ft. to **15** ~~115~~ 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? **East** How many feet? **200**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	top soil	122	158	clay
3	6	clay	158	173	sand rock
6	8	clay & sand	173	175	clay
8	18	clay			
28	19	rock			
19	34	clay			
34	37	shale			
37	38	clay			
38	29	rock			
39	40	sand rock			
40	54	shale			
54	65	sand rock			
65	80	shale			
80	110	clay			
110	122	sand rock			

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) **Oct. 28, 1983** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **360** This Water Well Record was completed on (mo/day/yr) **June 21, 1983** under the business name of **WAGNER'S WATER WELL DRILLING & SERVICE** by signature *William P. Wagner*

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.

OFFICE USE ONLY
T
R
11
EW
SEC. 7
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