

1 LOCATION OF WATER WELL  
 County: Ellis Fraction SE 1/4 NE 1/4 NE 1/4 Section Number 16 Township Number T 14 S Range Number R 18 E/W

Distance and direction from nearest town or city? 2 1/2 S. of Hays on 183  
 Street address of well if located within city?

2 WATER WELL OWNER: Jerry Maska  
 RR#, St. Address, Box #: Box 1 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Hays, Ks. 67601 Application Number:

3 DEPTH OF COMPLETED WELL: 71 ft. Bore Hole Diameter: 10 in. to . . . . . ft., and . . . . . in. to . . . . . ft.  
 Well Water to be used as:  
 Domestic  3 Feedlot  5 Public water supply  8 Air conditioning  11 Injection well  
 2 Irrigation  4 Industrial  Lawn and garden only  9 Dewatering  12 Other (Specify below)  
 10 Observation well  
 Well's static water level: 4.5 ft. below land surface measured on August month 25 day 1980 year  
 Pump Test Data: Well water was . . . . . ft. after . . . . . hours pumping. . . . . gpm  
 Est. Yield 15 gpm: Well water was 30 ft. after 30 minutes hours pumping Baling gpm

4 TYPE OF BLANK CASING USED:  
 1 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 Styrene 250 Threaded . . . . .  
 Blank casing dia: 5 in. to ~~26~~ 26 ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.  
 Casing height above land surface: 30 in., weight . . . . . lbs./ft. Wall thickness or gauge No: 5/16  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel  3 Stainless steel  5 Fiberglass  8 RMP (SR)  10 Asbestos-cement  
 2 Brass  4 Galvanized steel  6 Concrete tile  9 ABS  11 Other (specify) Styrene  
 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-Perforation Dia: 5 in. to ~~5~~ ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.  
 Screen-Perforated Intervals: From 41 ft. to 71 ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  
 Gravel Pack Intervals: From 40 ft. to 71 ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.

5 GROUT MATERIAL:  1 Neat cement  2 Cement grout  3 Bentonite  4 Other . . . . .  
 Grouted Intervals: From 7 ft. to 17 ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank  4 Cess pool  7 Sewage lagoon  10 Fuel storage  14 Abandoned water well  
 2 Sewer lines  5 Seepage pit  8 Feed yard  11 Fertilizer storage  15 Oil well/Gas well  
 3 Lateral lines  6 Pit privy  9 Livestock pens  12 Insecticide storage  16 Other (specify below)  
 13 Watertight sewer lines  
 Direction from well West How many feet 75? Water Well Disinfected? Yes  No   
 Was a chemical/bacteriological sample submitted to Department? Yes  No  If yes, date sample . . . . .  
 was submitted . . . . . month . . . . . day . . . . . year: Pump Installed? Yes  No   
 If Yes: Pump Manufacturer's name . . . . . Model No. . . . . HP . . . . . Volts . . . . .  
 Depth of Pump Intake . . . . . ft. Pumps Capacity rated at . . . . . gal./min.  
 Type of pump:  1 Submersible  2 Turbine  3 Jet  4 Centrifugal  5 Reciprocating  6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was  (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on August month 25 day 1980 year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 276  
 This Water Well Record was completed on August month 23 day 1980 year under the business name of Luca Water Well Drilling by (signature) John Luca

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		TO		LITHOLOGIC LOG		LITHOLOGIC LOG	
	FROM	TO	FROM	TO	FROM	TO	FROM	TO
	0	38						
	38	61						
	61	67						
	67	70						
	70	71						

ELEVATION: . . . . .

Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft. 4. . . . . ft. (Use a second sheet if needed)

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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY  
T 14 R 18 E/W  
SEC 16  
SE 1/4 NE 1/4 NE 1/4