

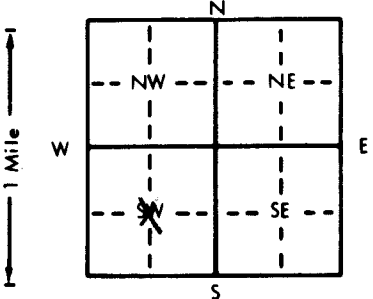
1 LOCATION OF WATER WELL: County: Trego Fraction $\frac{1}{4}$ C $\frac{1}{4}$ SW $\frac{1}{4}$ Section Number 19 Township Number T 14 S Range Number R 24 E/W

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

12 north 5 1/2 west of Ransom

2 WATER WELL OWNER: Lawrence Wiedeman
 RR#, St. Address, Box # : _____ Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Ransom, Ks. 67572 Application Number: _____

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



4 DEPTH OF COMPLETED WELL... 680 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 210 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL ... 240 ft. below land surface measured on mo/day/yr 11-16-81
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield NA gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter... 10 in. to 680 ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 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 Stock
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X _____; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes HTH No _____

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
 Ø PVC 4 ABS 7 Fiberglass _____ Threaded _____

Blank casing diameter 4 in. to 640 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 18 in., weight _____ lbs./ft. Wall thickness or gauge No. 237

TYPE OF SCREEN OR PERFORATION MATERIAL: Ø PVC 10 Asbestos-cement
 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: 5 Gauzed wrapped Ø Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From 640 ft. to 680 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 10 ft. to 680 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout intervals: From 0 ft. to 10 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage NONE

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	10	Silty top soil	644	650	Sand stone
10	95	Lime stone rock	650	680	Sand stone
95	100	Sand stone			
100	105	Gray shell			
105	210	Gray shell			
210	300	gray shell w/some rock			
300	372	Gray shell			
372	400	Gray shell w/white rock			
400	420	Gray shell w/white rock & clay			
420	465	Gray shell w/some rock			
465	510	Hard lens of rock, gray shell			
510	520	Hard brittle gray shell			
520	530	Gray shell w/small tan clay			
530	570	Gray shell w/streaks of coal and white clay			
570	644	Gray shell w/streaks of coal and white clay			

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) 11-20-81 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 135 This Water Well Record was completed on (mo/day/yr) 12-10-81 under the business name of Rosencrantz-Bemis Ent. by (signature) Rosa Dodson

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 14 R 24 SEC 19 1/4 SW 1/4