

BAD

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>WALLACE</u>	<u>SE 1/4 SE 1/4 NW 1/4</u>	<u>18</u>	<u>T 14 S</u>	<u>R 39 EW</u>

Distance and direction from nearest town or city? 7M SE of Sharon Springs Street address of well if located within city?

2 WATER WELL OWNER: Harold Schmolzheid
 RR#, St. Address, Box #: Sharon Springs, Kans. 67758
 City, State, ZIP Code

Board of Agriculture, Division of Water Resources
Application Number:

3 DEPTH OF COMPLETED WELL... 105 ft. Bore Hole Diameter... 8 in. to X 105 ft., and ... in. to ... ft.

Well Water to be used as:

1 Domestic	3 Feedlot	6 Oil field water supply	9 Dewatering	11 Injection well
2 Irrigation	4 Industrial	7 Lawn and garden only	10 Observation well	12 Other (Specify below)

Well's static water level... 50 ft. below land surface measured on... 7 month 25 day 78 year

Pump Test Data ~~XXX~~: Well water was... ft. after... hours pumping... gpm
 Est. Yield Not tested gpm: Well water was... ft. after... hours pumping... gpm

4 TYPE OF BLANK CASING USED:

1 Steel	<u>3 RMP (SR)</u>	6 Asbestos-Cement	9 Other (specify below)
2 PVC	4 ABS	7 Fiberglass	

Blank casing dia... 0 in. to... 8.5 ft., Dia... in. to... ft., Dia... in. to... ft.

Casing height above land surface... 15 in., weight... 1 9/10 lbs./ft. Wall thickness or gauge No. 250

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	<u>8 RMP (SR)</u>	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	<u>8 Saw cut</u>	11 None (open hole)
2 Louvered shutter	4 Key punched <u>85-105</u>	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify)	

Screen-Perforation Dia... 5 in. to... X 8.5 ft., Dia... in. to... ft., Dia... in. to... ft.

Screen-Perforated Intervals: From... 8.5 ft. to... 105 ft., From... ft. to... ft., From... ft. to... ft., From... ft. to... ft.

Gravel Pack Intervals: From... 18 ft. to... 105 ft., From... ft. to... 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... 4 ft. to... 18 ft., From... ft. to... ft., From... ft. to... ft., From... ft. to... ft.

What is the nearest source of possible contamination: E

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	<u>9 Livestock pens</u>	12 Insecticide storage	16 Other (specify below)
			13 Watertight sewer lines	

Direction from well... North How many feet... 7.5? 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... Red Jacket Model No... 14BC HP... 1 Volts... 230

Depth of Pump Intake... 70 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... 7 month... 25 day 78 year

and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 139

This Water Well Record was completed on... 8 month... 1 day 79 year under the business name of Bartell Drilling by (signature) Joyce Bartell

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM			TO			LITHOLOGIC LOG		
	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG			
	0	17	Top Soil	87	103	Sand			
	17	21	Sand Clay	103	105	CLAY & SHALE			
	21	28	Sand & Clay Strips						
	28	32	Sand Clay						
	32	58	Sand & Sand Rock Strip						
	58	68	Sand - Good						
	68	74	Sand Clay						
	74	76	Sand						
	76	81	Sand Clay						
	81	83	Sand						
ELEVATION:	83	87	Sand Clay						

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
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R
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EW
SEC
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SE 1/4
SE 1/4
NW 1/4