

1 LOCATION OF WATER WELL  
 County: Wallace Fraction NE Section Number 24 Township Number T 14 S Range Number R 40 EW

Distance and direction from nearest town or city? 4m. South 2 1/2 East Sharon Springs  
 Street address of well if located within city?

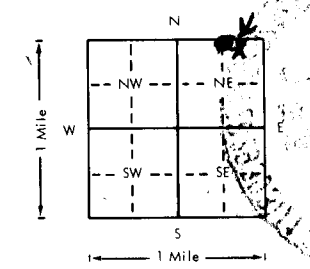
2 WATER WELL OWNER: Orville Walker  
 RR#, St. Address, Box #: Sharon Springs, Kansas 67758  
 City, State, ZIP Code: \_\_\_\_\_  
 Board of Agriculture, Division of Water Resources  
 Application Number: \_\_\_\_\_

3 DEPTH OF COMPLETED WELL: 180 ft. Bore Hole Diameter: 2 1/4 in. to 180 ft., and \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Well Water to be used as:  
 1 Domestic 100 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well  
 2 ~~irrigation~~ 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  
 7 Lawn and garden only 10 Observation well  
 Well's static water level \_\_\_\_\_ ft. below land surface measured on \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year  
 Pump Test Data: Well water was 170 ft. after 16 hours pumping 800 gpm  
 Est. Yield 800 gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

4 TYPE OF BLANK CASING USED:  
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued  Clamped \_\_\_\_\_  
 2 ~~RMP~~ 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded \_\_\_\_\_  
 7 Fiberglass Threaded \_\_\_\_\_  
 Blank casing dia 16 in. to 100 ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface 12 in. weight 22 lbs./ft. Wall thickness or gauge No. 179  
 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 ~~irrigation~~ 6 Wire wrapped 9 Drilled holes  
 7 Torch cut 10 Other (specify) \_\_\_\_\_  
 Screen-Perforation Dia 16 in. to 180 ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Screen-Perforated Intervals: From 100 ft. to 180 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 Gravel Pack Intervals: From 10 ft. to 180 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

5 GROUT MATERIAL: 1 ~~Neocement~~ 2 Cement grout 3 Bentonite 4 Other \_\_\_\_\_  
 Grouted Intervals: From 12 in. ft. to 10 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 What is the nearest source of possible contamination: none  
 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 \_\_\_\_\_ How many feet \_\_\_\_\_ ? Water Well Disinfected? Yes \_\_\_\_\_ No   
 Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No  If yes, date sample submitted \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year: Pump Installed? Yes  No \_\_\_\_\_  
 If Yes: Pump Manufacturer's name G. Worthington Model No. HG 8 HP \_\_\_\_\_ Volts \_\_\_\_\_  
 Depth of Pump Intake 170 ft. Pumps Capacity rated at 800 gal./min.  
 Type of pump: 1 Submersible 2 ~~torque~~ 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 \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 144  
 This Water Well Record was completed on \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year under the business name of Faust Supply Co. by (signature) Ralph Elfman mp.

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	90	topsoil, clay, sandstone			
90	106	gravel			
106	128	sandy clay			
128	135	gravel			
135	141	sandy clay			
141	170	gravel			
170	178	soapstone			
178	180	shale			

ELEVATION: \_\_\_\_\_

Depth(s) Groundwater Encountered 190-106 ft. 128-135 ft. 141-170 ft. \_\_\_\_\_ 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  
 40  
 SEC  
 24  
 NE 1/4  
 NE 1/4  
 NE 1/4