

LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number												
County:	Russell	NW ¼ NW ¼ SW ¼	11	T 15 S	R 15 E												
Distance and direction from nearest town or city street address of well if located within city? 1/4 North, 1/2 West, 3 North of Galatia, Kansas																	
WATER WELL OWNER:		Elroy Dietz															
R#, St. Address, Box # :		Route 1															
City, State, ZIP Code :		Russell, Kansas 67665															
		Board of Agriculture, Division of Water Resources															
		Application Number:															
LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		DEPTH OF COMPLETED WELL: 100 ft. ELEVATION: River bottom															
<div style="text-align: center;">N <table border="1"><tr><td>I</td><td>I</td></tr><tr><td>-- NW --</td><td>-- NE --</td></tr><tr><td>I</td><td>I</td></tr><tr><td>X</td><td></td></tr><tr><td>-- SW --</td><td>-- SE --</td></tr><tr><td>I</td><td>I</td></tr></table> S</div>		I	I	-- NW --	-- NE --	I	I	X		-- SW --	-- SE --	I	I	Pump test data: Well water was 70 ft. after 1 hours pumping 25 gpm Est. Yield .25 gpm: Well water was ft. after hours pumping gpm Bore Hole Diameter .10 in. to 100 ft., and in. to ft. WELL WATER TO BE USED AS: 1 Domestic 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 Was a chemical/bacteriological sample submitted to Department? Yes.....No.....X; If yes, mo/day/yr sample was submitted			
I	I																
-- NW --	-- NE --																
I	I																
X																	
-- SW --	-- SE --																
I	I																
TYPE OF BLANK CASING USED: 2		Casing Joints: Glued X Clamped															
1 Steel 3 RMP (SR)		5 Wrought iron 8 Concrete tile 11 Injection well															
2 PVC 4 ABS		6 Asbestos-Cement 9 Other (specify below) 12 Other (Specify below)															
ank casing diameter .5 in. to 80 ft., Dia.		7 Fiberglass Threaded.															
casing height above land surface .18 in., weight 160 lbs./ft. Wall thickness or gauge No. .26																	
TYPE OF SCREEN OR PERFORATION MATERIAL: 7		7 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: 8		5 Gauzed wrapped 8 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 80 ft. to 100 ft., From ft. to ft.																	
GRAVEL PACK INTERVALS: From 40 ft. to 100 ft., From ft. to ft.																	
GROUT MATERIAL: 1 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: None		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																	
Direction from well?		How many feet?															
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG												
0	4	Topsoil															
4	14	Sand															
14	58	Blue clay															
58	100	Sand and sandstone															
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) August 14, 1985 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 199 This Water Well Record was completed on (mo/day/yr) August 16, 1985 Under the business name of Karst Water Well Drilling & Service, Inc. by (signature) [Signature]																	
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.																	