

1 LOCATION OF WATER WELL: County: <u>Ellsworth</u>	Fraction NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$	Section Number 21	Township Number T 15 S	Range Number R 8 <u>EW</u>
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Distance and direction from nearest town or city street address of well if located within city?

in Ellsworth, Kansas

2 WATER WELL OWNER: Dennis Boepple RR#, St. Address, Box # : 1011 St. Clair City, State, ZIP Code : <u>Ellsworth, Kansas 67439</u>	Board of Agriculture, Division of Water Resources Application Number:
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>55</u> ft. ELEVATION: <u>Unknown</u>
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1 Mile

Depth(s) Groundwater Encountered 1.42 ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL 42 ft. below land surface measured on mo/day/yr 6/26/88

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield 10 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter 8 in. to 55 ft., and _____ in. to _____ ft.

WELL WATER TO BE USED AS:

5 Public water supply	8 Air conditioning	11 Injection well
1 Domestic	3 Feedlot	6 Oil field water supply
2 Irrigation	4 Industrial	7 <u>Lawn and garden only</u>
10 Observation well		

Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: <u>Glued</u> Clamped
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
2 <u>PVC</u>	4 ABS	7 Fiberglass	10 Asbestos-cement
Blank casing diameter <u>5</u> in. to <u>35</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.			
Casing height above land surface <u>12</u> in., weight <u>2.8</u> lbs./ft. Wall thickness or gauge No. <u>Sch. 40</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:			
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
SCREEN OR PERFORATION OPENINGS ARE:			
1 Continuous slot	3 Mill slot	5 Gauzed wrapped	8 <u>Saw cut</u>
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes
3 Torch cut	7 Torch cut	8 Saw cut	11 None (open hole)
SCREEN-PERFORATED INTERVALS: From <u>35</u> ft. to <u>55</u> ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>55</u> ft., From _____ ft. to _____ ft.			

6 GROUT MATERIAL:	1 <u>Neat cement</u>	2 Cement grout	3 Bentonite	4 Other
Grout Intervals: From <u>0</u> ft. to <u>20</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.				
What is the nearest source of possible contamination:				
1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandoned water well
2 <u>Sewer lines</u>	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
Direction from well? <u>West</u>			How many feet? <u>50</u>	

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	20	Clay			
20	55	Sand rock			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>6/26/88</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>186</u> . This Water Well Record was completed on (mo/day/yr) <u>9/4/88</u> under the business name of <u>Kelly's Water Well Service</u> by (signature) <u>[Signature]</u>
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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, Bureau of Water Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.

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