

1 LOCATION OF WATER WELL: County: <u>Greely</u>		Fraction: <u>SE 1/4 SE 1/4 NE 1/4</u>	Section Number: <u>232</u>	Township Number: <u>T 16 S</u>	Range Number: <u>R 39 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1/4 mi 6 mi 9 mi from Tribune</u>					
2 WATER WELL OWNER: RR#, St. Address, Box #: City, State, ZIP Code		<u>Gerold Price</u> <u>Tribune, Kansas 67879</u> Board of Agriculture, Division of Water Resources Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>110</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>83</u> ft. 2. <u>110</u> ft. 3. <u>814/81</u> ft. WELL'S STATIC WATER LEVEL <u>83</u> ft. below land surface measured on mo/day/yr <u>8/4/81</u> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield <u>Not tested</u> Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter: <u>8</u> in. to <u>110</u> ft., and _____ in. to _____ ft. WELL WATER TO BE USED AS: <input checked="" type="checkbox"/> 1 Domestic <input type="checkbox"/> 3 Feedlot <input type="checkbox"/> 6 Oil field water supply <input type="checkbox"/> 9 Dewatering <input type="checkbox"/> 11 Injection well <input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 4 Industrial <input type="checkbox"/> 7 Lawn and garden only <input type="checkbox"/> 10 Observation well <input type="checkbox"/> 12 Other (Specify below) _____ Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> ; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No <input checked="" type="checkbox"/>			
		5 TYPE OF BLANK CASING USED:			
		1 Steel <input checked="" type="checkbox"/> 2 AMP (SR) 3 Wrought iron 4 Concrete tile CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____ 4 PVC 5 ABS 6 Asbestos-Cement 7 Other (specify below) Welded _____ 7 Fiberglass Threaded _____ Blank casing diameter <u>5</u> in. to <u>90</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface <u>18</u> in., weight <u>19/10</u> lbs./ft. Wall thickness or gauge No. <u>44</u> .250			
		TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass <input checked="" type="checkbox"/> 6 AMP (SR) 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____ 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped <input checked="" type="checkbox"/> 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) _____			
SCREEN-PERFORATED INTERVALS:		From <u>5</u> ft. to <u>90</u> ft., From _____ ft. to _____ ft. From <u>90</u> ft. to <u>110</u> ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From <u>18</u> ft. to <u>110</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.			
6 GROUT MATERIAL: <input checked="" type="checkbox"/> 1 neat cement 2 Cement grout 3 Bentonite 4 Other _____					
Grout Intervals: From <u>40</u> ft. to <u>18</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination: <u>None - ?</u>					
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well 2 Sewer lines 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) <u>windmill well (in pasture)</u> 13 Insecticide storage					
Direction from well? How many feet?					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
<u>0</u>	<u>42</u>	<u>top soil</u>			
<u>42</u>	<u>83</u>	<u>sandy clay</u>			
<u>83</u>	<u>84 1/2</u>	<u>sand</u>			
<u>84 1/2</u>	<u>107</u>	<u>sand clay</u>			
<u>107</u>	<u>110</u>	<u>other & shale</u>			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>8/4/81</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>139</u> This Water Well Record was completed on (mo/day/yr) <u>8/13/81</u> under the business name of <u>Bartell Drilling</u> by (signature) <u>Daylene Bartell Grouse</u>					
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.					