

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <u>Ellsworth</u>		SW 1/4 SW 1/4 SE 1/4		21		T 16 S		R 6	
Distance and direction from nearest town or city street address of well if located within city?									
<u>Venago Area Kanopolis Lake</u>									
2 WATER WELL OWNER: <u>Elmer Duis</u>									
RR#, St. Address, Box # : <u>308 E 15th</u>									
City, State, ZIP Code : <u>Concordia, KS 66901</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>58</u> ft. ELEVATION: <u>29</u> ft.							
		Depth(s) Groundwater Encountered <u>1</u> ft. 2. <u>29</u> ft. 3. <u>8-25-89</u> ft.							
		WELL'S STATIC WATER LEVEL <u>29</u> ft. below land surface measured on mo/day/yr <u>8-25-89</u>							
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm							
		Est. Yield <u>5-6</u> gpm Well water was _____ ft. after _____ hours pumping _____ gpm							
		Bore Hole Diameter <u>8</u> in. to <u>59</u> ft., and _____ in. to _____ ft.							
		WELL WATER TO BE USED AS:							
		1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well							
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was submitted _____							
		Water Well Disinfected? Yes <u>X</u> No _____							
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: <u>Glued</u> <u>X</u> <u>Clamped</u> 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____									
Blank casing diameter <u>5</u> in. to <u>48</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Casing height above land surface <u>12</u> in., weight <u>2.91</u> lbs./ft. Wall thickness or gauge No. <u>265</u>									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (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 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>48</u> ft. to <u>58</u> ft., From _____ ft. to _____ ft.									
From <u>20</u> ft. to <u>58</u> ft., From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.									
From _____ ft. to _____ ft., From _____ ft. to _____ ft.									
6 GROUT MATERIAL:									
1 Neat cement 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 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) _____ 13 Insecticide storage									
Direction from well? <u>Southeast</u> How many feet? <u>125</u>									
FROM		TO		LITHOLOGIC LOG		FROM		TO	
0		2		Sandy top Soil					
2		13		Medium sands					
13		16		Tan Clay					
16		26		Medium course sand					
26		38		Shale					
38		44		White Sandstone					
44		52		Gray Shale					
52		59		Hard rock & sandstone					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>8-25-89</u> and this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's License No. <u>138</u> This Water Well Record was completed on (mo/day/yr) <u>8-30-89</u>									
under the business name of <u>Peterson Irrigation, Inc.</u> by (signature) <u>Mike Peterson</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, Bureau of Water Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.									

OFFICE USE ONLY

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