

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number									
County: Ellsworth		SW 1/4 SW 1/4 SE 1/4		17		T 16 S		R 8W E/W									
Distance and direction from nearest town or city street address of well if located within city? 5 S of Ellsworth, Kansas																	
2 WATER WELL OWNER: Todd Wacker																	
RR#, St. Address, Box # : Route 1, Box 190																	
City, State, ZIP Code : Ellsworth, Kansas 67439																	
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 95 ft. ELEVATION: Unknown															
N 1 Mile W E S 1 Mile <table border="1" style="margin: auto; text-align: center;"><tr><td> </td><td> </td></tr><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr><tr><td> </td><td>X</td></tr></table>				NW	NE	SW	SE		X	Depth(s) Groundwater Encountered 1. 65 ft. 2. ft. 3. ft.							
		NW	NE														
		SW	SE														
	X																
WELL'S STATIC WATER LEVEL 65 ft. below land surface measured on mo/day/yr 3/24/92																	
Pump test data: Well water was ft. after hours pumping gpm																	
Est. Yield 20 gpm: Well water was ft. after hours pumping gpm																	
Bore Hole Diameter 8 in. to 95 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 <u>Lawn and garden only</u> 10 Monitoring 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:																	
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: <u>Glued</u> Clamped																	
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded																	
Blank casing diameter in. to 75 ft., Dia in. to ft., Dia in. to ft.																	
Casing height above land surface 12 in., weight 2.8 lbs./ft. Wall thickness or gauge No. Sch. 40																	
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)																	
SCREEN OR PERFORATION OPENINGS ARE:																	
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 <u>Saw cut</u> 11 None (open hole)																	
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes																	
3 Torch cut 10 Other (specify)																	
SCREEN-PERFORATED INTERVALS: From ft. to 95 ft., From ft. to ft.																	
GRAVEL PACK INTERVALS: From ft. to 95 ft., From ft. to ft.																	
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS																	
0 40 Clay																	
40 70 Shale																	
70 95 Sand rock																	
6 GROUT MATERIAL: 1 <u>Neat cement</u> 2 Cement grout 3 Bentonite 4 Other																	
Grout intervals: From 0 ft. to 20 ft., From ft. to ft., From ft. to ft.																	
What is the nearest source of possible contamination:																	
1 <u>Septic tank</u> 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? South How many feet? 120																	
7 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) 3/24/92 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186 This Water Well Record was completed on (mo/day/yr) 4/28/92 under the business name of Kelly's Water Well Service by (signature) <i>Dean Dond</i>																	
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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.																	