

1 LOCATION OF WATER WELL: Fraction 3/4 NC Section Number 28 Township Number T 17 S Range Number R 18 EW
 County: RUSH SW 1/4 SW 1/4

Distance and direction from nearest town or city street address of well if located within city?
TIMIKEM 1/4 S 17 1/4 W NORTH 310 E

2 WATER WELL OWNER: LEONARD BURGLARDT
 RR#, St. Address, Box #: RR Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: CTIS, KS, 67565 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF COMPLETED WELL: 60 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 35 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 29 ft. below land surface measured on mo/day/yr 3-29-86
 Pump test data: Well water was 37 ft. after 1 hours pumping 20 gpm
 Est. Yield _____ gpm; Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter 7 1/8 in. to 60 ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 1 Domestic 1 3 Feedlot _____ 6 Oil field water supply _____ 9 Dewatering _____ 11 Injection well _____
 2 Irrigation _____ 4 Industrial _____ 7 Lawn and garden only _____ 10 Observation well _____
 5 Public water supply _____ 8 Air conditioning _____
 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: Glued XX Clamped _____
 2 PVC _____ 4 ABS _____ 6 Asbestos-Cement _____ 9 Other (specify below) _____ Welded _____
 7 Fiberglass _____ Threaded _____
 Blank casing diameter 5 in. to 50 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 12 in., weight 2.65 lbs./ft. Wall thickness or gauge No. 214
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel _____ 3 Stainless steel _____ 5 Fiberglass _____ 7 PVC _____ 10 Asbestos-cement _____
 2 Brass _____ 4 Galvanized steel _____ 6 Concrete tile _____ 8 RMP (SR) _____ 11 Other (specify) _____
 9 ABS _____ 12 None used (open hole) _____
 SCREEN OR PERFORATION OPENINGS ARE: 1/8
 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 50 ft. to 60 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 40 ft. to 60 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 4 1/2 ft. to 14 1/2 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank OVER 50 FT. 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? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	1	TOP SOIL			
1	8	BROWN & WHITE CLAY			
8	20	BROWN CLAY W/SOME S&G MLX			
20	30	SAND & GRAVEL			
30	35	THIN CLAY			
35	64	SAND & GRAVEL W/CLAY STREAK.			
64		SHALE			

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) 3-28-86 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 389 This Water Well Record was completed on (mo/day/yr) 7-17-86 under the business name of KEISER WATER WELL SERV INC by (signature) Richard Weaver

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.