

1 LOCATION OF WATER WELL: County: Wichita	Fraction SE 1/4 NE 1/4 NE 1/4	Section Number 20	Township Number T 17 S	Range Number R 37		
Distance and direction from nearest town or city street address of well if located within city?						
2 WATER WELL OWNER: L & R Farms, Ralph Reitz						
RR#, St. Address, Box #: Box 86		Board of Agriculture, Division of Water Resources				
City, State, ZIP Code: Lawrence, Ks 66044-0086		Application Number: 13810				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 187 ft. ELEVATION:				
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.				
		WELL'S STATIC WATER LEVEL 143 ft. below land surface measured on mo/day/yr				
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm				
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm				
		Bore Hole Diameter 18 in. to 187 ft. and _____ in. to _____ ft.				
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well				
		1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)				
		2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well				
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was submitted _____				
		Water Well Disinfected? Yes X No _____				
5 TYPE OF BLANK CASING USED:						
1 Steel 3 RMP (SR)		5 Wrought Iron 8 Concrete tile		CASING JOINTS: Glued X Clamped _____		
2 PVC 4 ABS		6 Asbestos-Cement 9 Other (specify below)		Welded _____		
		7 Fiberglass		Threaded _____		
Blank casing diameter 10 in. to 147 ft., Dia _____ in. to _____ ft.		Casing height above land surface 24 in., weight 7.80 lbs./ft. Wall thickness or gauge No. .365				
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 147 ft. to 187 ft. From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From 20 ft. to 187 ft. From _____ ft. to _____ ft.						
6 GROUT MATERIAL: 1 Neat cement 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 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 old well		
Direction from well? east		How many feet? 290				
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2		Surface			Lenses
2	24		Loess	154	164	Fine to med sd w/caliche strks,
24	44		Caliche w/clay strks			Semi-tight
44	66		Caliche & clay w/sd strks (hard)	164	169	Clay w/sand lenses
66	70		Fine to med sd w/caliche strks	169	182	Fine to some med sd w/clay lenses
			(tight)			(semi-loose)
70	94		Clay w/caliche lenses	182	184	Caliche
94	107		Clay & caliche w/sd strks	184	187	Yellow ochre
107	115		Fine to med sd w/clay & caliche Strks			
115	121		Clay & caliche w/sand strks			
121	140		Fine to med sd w/clay & caliche Lenses			
140	154		Fine to some med sd w/caliche			
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/yr) 2-3-08						
Water Well Contractor's License No. 554		This Water Well Record was completed on (mo/day/yr) 5-24-08				
under the business name of Woofter Pump & Well Inc.		by (signature) <i>[Signature]</i>				
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 600 S. Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.						

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