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|---------------------------|----------------------|----------------|-----------------|--------------|
| 1 LOCATION OF WATER WELL: | Fraction | Section Number | Township Number | Range Number |
| County: <u>Ness</u> | NW 1/4 NW 1/4 NW 1/4 | 32 | T 18 S | R 22 E/W |

Distance and direction from nearest town or city street address of well if located within city?

5 miles west; 1/4 mile south of Bazine KS

2 WATER WELL OWNER: Bill Braun
 RR#, St. Address, Box # : RR Box 75 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Brownell KS 67521 Application Number:

| | |
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| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | 4 DEPTH OF COMPLETED WELL: <u>55</u> ft. ELEVATION: <u>valley</u> |
|--|---|

1 Mile

Depth(s) Groundwater Encountered 1. 35 ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 20 ft. below land surface measured on mo/day/yr 7/13/00

Pump test data: Well water was 50 ft. after 2 hours pumping 4 gpm

Est. Yield 4 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter 10 in. to 55 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 X; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes X No _____

5 TYPE OF BLANK CASING USED: 2 _____ 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____

1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____

2 PVC 4 ABS 7 Fiberglass _____ Threaded _____

Blank casing diameter 5 in. to 35 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface 24 in., weight 2.29 lbs./ft. Wall thickness or gauge No. .26

TYPE OF SCREEN OR PERFORATION MATERIAL: 7 _____ 7 PVC 10 Asbestos-cement

1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____

2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 8 _____ 5 Gauzed wrapped 8 Saw cut 11 None (open hole)

1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes

2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From 55 ft. to 35 ft., From _____ ft. to _____ ft.

From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 20 ft. to 55 ft., From _____ ft. to _____ ft.

From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 3 _____ 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 <u>Septic tank</u> | 4 <u>Lateral lines</u> | 7 <u>Pit privy</u> | 10 <u>Livestock pens</u> | 14 <u>Abandoned water well</u> |
| 2 <u>Sewer lines</u> | 5 <u>Cess pool</u> | 8 <u>Sewage lagoon</u> | 11 <u>Fuel storage</u> | 15 <u>Oil well/Gas well</u> |
| 3 <u>Watertight sewer lines</u> | 6 <u>Seepage pit</u> | 9 <u>Feedyard</u> | 12 <u>Fertilizer storage</u> | 16 <u>Other (specify below)</u> |
| | | | 13 <u>Insecticide storage</u> | |

Direction from well? _____ How many feet? _____

| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|----|------------------------|------|----|--------------------|
| 0 | 3 | <u>Topsoil</u> | | | |
| 3 | 24 | <u>Gumbo</u> | | | |
| 24 | 35 | <u>Clay</u> | | | |
| 35 | 37 | <u>Clay/Trace Sand</u> | | | |
| 37 | 43 | <u>Clay</u> | | | |
| 43 | 47 | <u>Yellow Clay</u> | | | |
| 47 | 55 | <u>Shale</u> | | | |
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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) 7/13/00 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 199 This Water Well Record was completed on (mo/day/yr) 7/13/00 under the business name of Karst Water Well Drilling & Service, Inc. by (signature) *Mal...*

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.

OFFICE USE ONLY

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EW

SEC.

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