

| | | | | |
|--------------------------|---|----------------|-----------------------------|------------------------------|
| 1 LOCATION OF WATER WELL | Fraction | Section Number | Township Number | Range Number |
| County: <u>Iane</u> | <u>NW</u> 1/4 <u>SE</u> 1/4 <u>NE</u> 1/4 | <u>7</u> | <u>T</u> <u>18</u> <u>S</u> | <u>R</u> <u>27</u> <u>NW</u> |

Distance and direction from nearest town or city? 7 Miles East
1 3/4 North 1/4 West of Dighton, Kansas

Street address of well if located within city?

2 WATER WELL OWNER: Ed Borell

RR#, St. Address, Box # : _____
 City, State, ZIP Code : Shields, Kansas 67874

Board of Agriculture, Division of Water Resources
 Application Number: _____

3 DEPTH OF COMPLETED WELL: 84 ft. Bore Hole Diameter: 9 in. to 84 ft., and _____ in. to _____ ft.

Well Water to be used as:

| | | | | |
|--------------|------------------|--------------------------|---------------------|--------------------------|
| 1 Domestic | <u>3 Feedlot</u> | 6 Oil field water supply | 9 Dewatering | 11 Injection well |
| 2 Irrigation | 4 Industrial | 7 Lawn and garden only | 10 Observation well | 12 Other (Specify below) |

Well's static water level: 67 ft. below land surface measured on 4 month 9 day 1980 year

Pump Test Data: Well water was 68 ft. after 4 hours pumping. 10 gpm

Est. Yield 50 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:

| | | | | |
|---------|-------------------|-------------------|-------------------------|---|
| 1 Steel | <u>3 RMP (SR)</u> | 6 Asbestos-Cement | 9 Other (specify below) | Casing Joints: <u>Glued</u> _____ Clamped _____ |
| 2 PVC | 4 ABS | 7 Fiberglass | | Welded _____ |
| | | | | Threaded _____ |

Blank casing dia: 5 in. to 69 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.

Casing height above land surface: 12 in., weight 1.8 lbs./ft. Wall thickness or gauge No. 250

TYPE OF SCREEN OR PERFORATION MATERIAL:

| | | | | |
|---------|--------------------|-----------------|-------------------|--------------------------|
| 1 Steel | 3 Stainless steel | 5 Fiberglass | <u>8 RMP (SR)</u> | 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 | <u>8 Saw cut</u> | 11 None (open hole) |
| 2 Louvered shutter | 4 Key punched | 6 Wire wrapped | 9 Drilled holes | |
| | | 7 Torch cut | 10 Other (specify) _____ | |

Screen-Perforation Dia: 5 in. to 84 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.

Screen-Perforated Intervals: From 69 ft. to 84 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

Gravel Pack Intervals: From 60 ft. to 84 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

5 GROUT MATERIAL: Neat cement _____ 2-Cement grout _____ 3-Bentonite _____ 4-Other Drill Cuttings _____

Grouted Intervals: From 15 ft. to 60 ft. From 0 ft. to 15 ft. From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

| | | | | |
|-----------------|---------------|--------------------|---------------------------|--------------------------|
| 1 Septic tank | 4 Cess pool | 7 Sewage lagoon | 10 Fuel storage | 14 Abandoned water well |
| 2 Sewer lines | 5 Seepage pit | <u>8 Feed yard</u> | 11 Fertilizer storage | 15 Oil well/Gas well |
| 3 Lateral lines | 6 Pit privy | 9 Livestock pens | 12 Insecticide storage | 16 Other (specify below) |
| | | | 13 Watertight sewer lines | |

Direction from well: East How many feet: 100 ? Water Well Disinfected? Yes _____ No _____

Was a chemical/bacteriological sample submitted to Department? Yes _____ (No) _____ If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No _____

If Yes: Pump Manufacturer's name: Cylinder Model No. _____ HP _____ Volts _____

Depth of Pump Intake: 78 ft. Pumps Capacity rated at 5 gal./min.

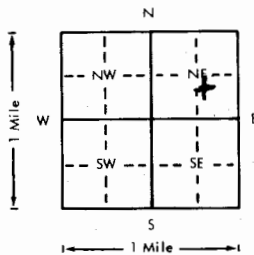
Type of pump: 1 Submersible _____ 2 Turbine _____ 3 Jet _____ 4 Centrifugal _____ 5 Reciprocating _____ 6 Other _____

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month _____ day _____ year

and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 232

This Water Well Record was completed on _____ month _____ day _____ year under the business name of Weishaar Drilling & Supply Inc. by (signature) _____

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



| FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHOLOGIC LOG |
|------|----|----------------|------|----|----------------|
| 0 | 2 | Clay | 2 | 8 | Gyp Rock |
| 8 | 14 | Fine sand | 14 | 21 | Clay |
| 21 | 28 | Fine Sand | 28 | 32 | Sand rock |
| 32 | 38 | Fine Sand | 38 | 44 | Sand Rock |
| 44 | 48 | Clay | 48 | 53 | Sand Rock |
| 53 | 60 | Sand | 60 | 67 | Sand & gravel |
| 67 | 70 | Clay | 70 | 78 | Sand & gravel |
| 78 | 83 | Yellow clay | 83 | 84 | Shale |

ELEVATION: _____

Depth(s) Groundwater Encountered 1. 67 ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)

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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

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