

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Wichita</u>		<u>SW</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	<u>2</u>	<u>T</u> <u>19</u> <u>S</u>	<u>R</u> <u>35</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>2 3/4 miles East 3 1/2 miles South of Marienthal, Kansas</u>					
2 WATER WELL OWNER: <u>Arlyn Kershner</u>					
RR#, St. Address, Box # :			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Modoc, Kansas 67866</u>			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>115</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>82</u> ft. 2. <u>82</u> ft. 3. <u>82</u> ft.			
		WELL'S STATIC WATER LEVEL <u>82</u> ft. below land surface measured on mo/day/yr <u>5/9/85</u>			
		NA 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 <u>.9</u> in. to <u>1.15</u> in. and _____ in. to _____ in.			
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well <input checked="" type="checkbox"/> Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) <input type="checkbox"/> Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well 13 Other (Specify below)			
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____					
Water Well Disinfected? Yes <input checked="" type="checkbox"/> No					
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: <u>Glued</u> _____ Clamped _____
<input checked="" type="checkbox"/> 2 PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
			7 Fiberglass		Threaded _____
Blank casing diameter <u>5</u> in. to <u>8.5</u> in. Dia. _____ in. to _____ in. Dia. _____ in. to _____ in.					
Casing height above land surface <u>12</u> in., weight <u>2.9</u> lbs./ft. Wall thickness or gauge No. <u>.265</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel	5 Fiberglass	7 <input checked="" type="checkbox"/> 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 Continuous slot		3 Mill slot	5 Gauzed wrapped	8 <input checked="" type="checkbox"/> 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 <u>85</u> ft. to <u>115</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>80</u> ft. to <u>115</u> ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: <input checked="" type="checkbox"/> 1 Neat cement <input type="checkbox"/> 2 Cement grout <input type="checkbox"/> 3 Bentonite <input checked="" type="checkbox"/> 4 Other <u>Drill cuttings</u>					
Grout Intervals: From <u>15</u> ft. to <u>80</u> ft., From <u>4</u> ft. to <u>15</u> ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines	7 Pit privy	10 <input checked="" type="checkbox"/> 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? <u>East</u> How many feet? <u>100</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	24	Clay	24	34	Caliche
34	40	Clay	40	47	Sand
47	63	Sand rock	63	69	Sand
69	75	Clay	75	79	Fine sand
79	81	Sand rock	81	85	Clay
85	88	Fine sand clay streaks	88	90	Clay
90	95	Fine sand clay streaks	95	103	Clay
103	105	Fine sand	105	115	Clay
115		Shale			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> (1) constructed, <input type="checkbox"/> (2) reconstructed, or <input type="checkbox"/> (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>5/10/85</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>232</u> This Water Well Record was completed on (mo/day/yr) <u>5/22/85</u> under the business name of <u>Weishaar Drilling & Supply Inc.</u> by (signature) <u>[Signature]</u>					
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.					

OFFICE USE ONLY

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