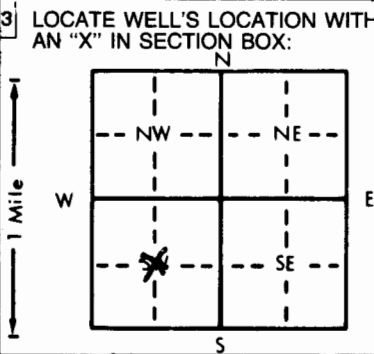


SCHARTZ #2

1 LOCATION OF WATER WELL: Fraction $\frac{1}{4}$ C $\frac{1}{4}$ SW $\frac{1}{4}$ Section Number 6 Township Number T 20 S Range Number R 10 E

Distance and direction from nearest town or city, street address of well if located within city?
RAYMOND 1/2N 3 1/2W 3 1/4N EASTSIDE.

2 WATER WELL OWNER: **Sterling Drilling Co., Inc.** **LOUIS SCHARTZ, ELLINWOOD, KS**
 RR#, St. Address, Box #: **Box 129, 6th & Cleveland** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **STERLING, KS. 67579** Application Number: **T85-595**



4 DEPTH OF COMPLETED WELL: **75** ft. ELEVATION: **---**
 Depth(s) Groundwater Encountered 1. **33** ft. 2. **---** ft. 3. **---** ft.
 WELL'S STATIC WATER LEVEL **14** ft. below land surface measured on mo/day/yr **6-28-85**
 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: **7 7/8** in. to **75** ft., and **---** in. to **---** ft.
 WELL WATER TO BE USED AS:
 5 Public water supply 8 Air conditioning 11 Injection well
 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 Observation well
 Was a chemical/bacteriological sample submitted to Department? Yes **---** No **X**; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes **---** No **X**

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 **5** in. to **45** ft. Dia **5** in. to **65 to 75** 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 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 **45** ft. to **65** ft. From **---** ft. to **---** ft.
 From **---** ft. to **---** ft. From **---** ft. to **---** ft.
 GRAVEL PACK INTERVALS: From **35** ft. to **75** 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 **0** ft. to **10** ft. From **---** ft. to **---** ft. From **---** ft. to **---** ft.
 What is the nearest source of possible contamination: **NONE**
 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
 Direction from well? **---** How many feet? **---**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	1	Top Soil			
1	15	CLAY			
15	30	FINE SAND			
30	33	HARD ROCK			
33	65	SAND ROCK & CLAY			
65	70	SAND ROCK & mostly clay			
70	74	CLAY			
74	75	Blue 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) **6-28-85** 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) **7-1-85** under the business name of **Reiser Water Well Service** by (signature) *Rudolph Reiser*
 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
T 20
R 10
SEC. 6
1/4
C 1/4
SW 1/4