

1) LOCATION OF WATER WELL		Fraction	Section Number		Township Number	Range Number	
County: <u>BARTON</u>		<u>C</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$	<u>13</u>		<u>T</u> <u>20</u> <u>S</u>	<u>R</u> <u>15</u> <u>EW</u>	
Distance and direction from nearest town or city? <u>DUNDEE 1 1/2 W 1/2 N</u>				Street address of well if located within city?			
2) WATER WELL OWNER: <u>EMPHASIS OIL OPERATIONS</u>							
RR#, St. Address, Box # : <u>506</u>				Board of Agriculture, Division of Water Resources			
City, State, ZIP Code <u>RUSSELL, KS 67665</u>				Application Number: <u>T 80-43</u>			
3) DEPTH OF COMPLETED WELL <u>50</u> ft. Bore Hole Diameter <u>9</u> in. to <u>30</u> ft., and _____ in. to _____ ft.							
Well Water to be used as:							
1 Domestic		3 Feedlot		5 Public water supply		8 Air conditioning	
2 Irrigation		4 Industrial		6 Oil field water supply		9 Dewatering	
		7 Lawn and garden only		10 Observation well		11 Injection well	
						12 Other (Specify below)	
Well's static water level <u>23</u> ft. below land surface measured on <u>Jan</u> month <u>14</u> day <u>1980</u> year							
Pump Test Data <u>NONE</u> : Well water was _____ ft. after _____ hours pumping _____ gpm							
Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm							
4) TYPE OF BLANK CASING USED:							
1 Steel		3 RMP (SR)		5 Wrought iron		8 Concrete tile	
2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)	
				7 Fiberglass		Casing Joints: <u>XXX</u> Glued <u>XXX</u> Clamped _____	
						Welded _____	
						Threaded _____	
Blank casing dia <u>5</u> in. to <u>30</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.							
Casing height above land surface <u>12</u> in., weight <u>278.3</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 PVC	
2 Brass		4 Galvanized steel		6 Concrete tile		8 RMP (SR)	
						10 Asbestos-cement	
						11 Other (specify)	
						12 None used (open hole)	
Screen or Perforation Openings Are: <u>1/8</u>							
1 Continuous slot		3 Mill slot		5 Gauzed wrapped		8 Saw cut	
2 Louvered shutter		4 Key punched		6 Wire wrapped		11 None (open hole)	
				7 Torch cut		9 Drilled holes	
						10 Other (specify)	
Screen-Perforation Dia <u>5</u> in. to <u>50</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.							
Screen-Perforated Intervals:							
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
Gravel Pack Intervals:							
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
5) GROUT MATERIAL:							
1 Neat cement		2 Cement grout		3 Bentonite		4 Other _____	
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.							
What is the nearest source of possible contamination: <u>NONE</u>							
1 Septic tank		4 Cess pool		7 Sewage lagoon		10 Fuel storage	
2 Sewer lines		5 Seepage pit		8 Feed yard		11 Fertilizer storage	
3 Lateral lines		6 Pit privy		9 Livestock pens		12 Insecticide storage	
						13 Watertight sewer lines	
						14 Abandoned water well	
						15 Oil well/Gas well	
						16 Other (specify below)	
Direction from well _____ How many feet _____ ? Water Well Disinfected? Yes _____ No <u>✓</u>							
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>✓</u> If yes, date sample was submitted _____ month _____ day _____ year							
Pump Installed? Yes _____ No <u>✓</u>							
If Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____							
Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ 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 <u>Jan</u> month <u>14</u> day <u>1980</u> year							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>389</u>							
This Water Well Record was completed on <u>Jan</u> month <u>16</u> day <u>1980</u> year under the business name of <u>MYERS WATER WELL SERVICE</u> by (signature) <u>Rudolph J. Keiser</u>							
7) LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		<u>0</u>	<u>50</u>	<u>SOIL</u>			
		<u>5</u>	<u>18</u>	<u>CLAY</u>			
		<u>18</u>	<u>20</u>	<u>SANDY CLAY</u>			
		<u>20</u>	<u>30</u>	<u>CLAY</u>			
		<u>30</u>	<u>50</u>	<u>GRAVEL</u>			
ELEVATION:							
Depth(s) Groundwater Encountered 1. _____ 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.							