

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Pawnee		NW 1/4 NW 1/4 SW 1/4	7	T 20 S	R 19 E (W)

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

Approximately 7 3/4 miles north and 3 miles east of Burdett

2 WATER WELL OWNER: Frank Price
 RR#, St. Address, Box # : P.O. Box 186
 City, State, ZIP Code : Burdett, KS 67523
 Board of Agriculture, Division of Water Resources
 Application Number:

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

4 DEPTH OF COMPLETED WELL 482 ft. ELEVATION: unknown

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

WELL'S STATIC WATER LEVEL 190 ft. below land surface measured on mo/day/yr 6-22-04

Pump test data: Well water was not checked ft. after _____ hours pumping _____ gpm

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

Bore Hole Diameter 8 3/4 in. to 500 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
2 Irrigation	4 Industrial	7 Domestic (lawn & garden)
		10 Monitoring well
		12 Other (specify below)

Stock Well

Was a chemical/bacteriological sample submitted to Department? Yes _____ No If yes, mo/day/yrs sample was submitted _____

Water Well Disinfected? Yes No _____

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass		Threaded _____

Blank casing diameter 5 in. to 400 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface 24 in., weight 2.38 lbs./ft. Wall thickness or gauge No 248

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	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	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)	ft.

SCREEN-PERFORATED INTERVALS: From 400 ft. to 480 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 20 ft. to 500 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Granular Bentonite

Grout Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From 0 ft. to 20 ft.

What is the nearest source of possible contamination:

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	Oil Field Tank Battery

Direction from well? Northwest How many feet? 100

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Topsoil	350	395	Clay, red/white
3	11	Clay, tan/brown	395	402	Clay, red/white with thin sandstone streaks
11	28	Clay, yellow/white	402	423	Sandstone, white, soft
28	30	Limestone, brown/yellow	423	434	Clay, red/white with sandstone streaks, thin
30	33	Clay, yellow/white	434	442	Sandstone, white, soft
33	37	Clay, gray/white with limestone streaks	442	450	Clay, red/white with sandstone streaks
37	46	Clay, dark gray with limestone	450	455	Sandstone, white, soft
46	216	Shale, black with clay streaks	455	500	Clay, red/white with thin layers of white sandstone
216	224	Shale, black with clay streaks and thin sandstone streaks			
224	237	Shale, black with clay streaks			
237	248	Sandstone with shale streaks			
248	250	Clay, gray/white, thin sandstone streaks			
250	350	Shale, white solution streaks and soft clay streaks			

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) 6-22-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/yr) 7-1-04 under the business name of Clarke Well & Equipment, Inc. by (signature) _____

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 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.