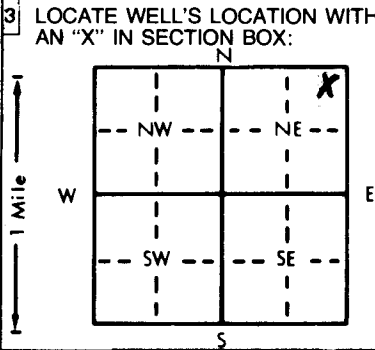


1 LOCATION OF WATER WELL: County: **PAWNEE** Fraction: **NE 1/4 NE 1/4 NE 1/4** Section Number: **32** Township Number: **T 20 S** Range Number: **R 20 E/W**
 Distance and direction from nearest town or city street address of well if located within city? **1/2 mile WEST, 5 mile NORTH, 3/4 mile WEST, and 1 mile NORTH of BURDETT, KS. 67523**

2 WATER WELL OWNER: **ESTAL JONES**
 RR#, St. Address, Box #: _____ Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **BURDETT, KS. 67523** Application Number: _____



4 DEPTH OF COMPLETED WELL: **155** ft. ELEVATION: **VALLEY**
 Depth(s) Groundwater Encountered 1. **115** ft. 2. **125** ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL **48.5** ft. below land surface measured on mo/day/yr **AUG. 1, 1985**
 Pump test data: Well water was **63** ft. after **10** hours pumping **15** gpm
 Est. Yield **40** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: **8** in. to **155** 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 **XX**; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes **XX** No _____

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued **XX** Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass _____ Threaded _____
 Blank casing diameter **5** in. to **135** ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface **24** in., weight _____ lbs./ft. Wall thickness or gauge No. **200 PLUS**
 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) _____
 SCREEN-PERFORATED INTERVALS: From **135** ft. to **155** ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **15** ft. to **25** ft. From _____ ft. to _____ ft.
 From **30** ft. to **155** ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout intervals: From **3** ft. to **15** ft., From **25** ft. to **30** ft., From _____ ft. to _____ 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 _____
 Direction from well? **SOUTH-SOTHEAST** How many feet? **120**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	black topsoil			
3	18	brown clay			
18	22	sand & yellow clay			
22	25	limestone rock			
25	55	black shale			
55	72	blue shale			
72	87	grey shale or clay			
87	115	light grey shale or clay			
115	120	strip of sandstone			
120	125	light grey shale			
125	157	sandstone			
157	160	grey shale or clay			

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) **AUG. 1, 1985** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **243** This Water Well Record was completed on (mo/day/yr) **AUG. 9, 1985** under the business name of **DEAN WATERHOUSE DRILLING** by (signature) *Dean Waterhouse*

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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