

OFFICE USE ONLY

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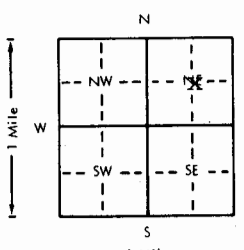
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1 LOCATION OF WATER WELL		Fraction Near Center of			Section Number	Township Number	Range Number
County: Rice		1/4	1/4	NE	1/4	26	T 20 S R 8 E4W
Distance and direction from nearest town or city? <u>3 1/4 miles South</u> <u>and 1 3/4 miles east of Lyons, KS</u>				Street address of well if located within city?			
2 WATER WELL OWNER: Jack Edwards		Board of Agriculture, Division of Water Resources					
RR#, St. Address, Box # : Route 1		Application Number: Not Available					
City, State, ZIP Code : Lyons, KS 67554							
3 DEPTH OF COMPLETED WELL <u>54</u> ft. Bore Hole Diameter <u>24</u> in. to <u>54</u> 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			
Well's static water level <u>9</u> ft. below land surface measured on <u>7</u> month <u>3</u> day <u>1980</u> year							
Pump Test Data : Well water was _____ ft. after _____ hours pumping _____ gpm							
Est. Yield Not Ck'd 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)	
Blank casing dia <u>16</u> in. to <u>24</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		7 Fiberglass		Casing Joints: Glued _____ Clamped _____			
Casing height above land surface <u>12</u> in., weight <u>31.75</u> lbs./ft. Wall thickness or gauge No. <u>188</u>				Welded <u>XX</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:				7 PVC		10 Asbestos-cement	
1 Steel		3 Stainless steel		5 Fiberglass		8 RMP (SR)	
2 Brass		4 Galvanized steel		6 Concrete tile		9 ABS	
Screen or Perforation Openings Are:				5 Gauzed wrapped		8 Saw cut	
1 Continuous slot		3 Mill slot		6 Wire wrapped		11 None (open hole)	
2 Louvered shutter		4 Key punched		7 Torch cut		10 Other (specify) <u>Doerr Bridge Slot</u>	
Screen-Perforation Dia <u>16</u> in. to <u>54</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.							
Gravel Pack Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
5 GROUT MATERIAL: 1 <u>Neat cement</u> 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:				10 Fuel storage		14 Abandoned water well	
1 Septic tank		4 Cess pool		7 Sewage lagoon		11 Fertilizer storage	
2 Sewer lines		5 Seepage pit		8 Feed yard		12 Insecticide storage	
3 Lateral lines		6 Pit privy		9 Livestock pens		13 Watertight sewer lines	
Direction from well <u>All</u> How many feet _____? Water Well Disinfected? Yes _____ No <u>X</u>							
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes <u>X</u> No _____							
If Yes: Pump Manufacturer's name <u>Peerless Pump Co.</u> Model No. <u>12MB-3</u> HP <u>40</u> Volts <u>460</u>							
Depth of Pump Intake <u>40</u> ft. Pumps Capacity rated at <u>900</u> gal./min.							
Type of pump: 1 <u>Submersible</u> 2 <u>Turbine</u> 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>7</u> month <u>3</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>185</u> This Water Well Record was completed on <u>12</u> month <u>17</u> day <u>1980</u> year under the business name of <u>Clarke Well & EQ., Inc.</u> by (signature) <i>[Signature]</i>							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	7	Sandy topsoil			
		7	11	Fine sand			
		11	37	Fine-Med. Sand & gravel			
		37	41	Yellow clay			
		41	49	Fine-Med. Sand & gravel			
		49	54	Tan clay			
ELEVATION: Unknown							
Depth(s) Groundwater Encountered <u>1</u> ft. <u>9</u> 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.							