

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>Rice</u>	<u>nw</u> $\frac{1}{4}$ <u>ne</u> $\frac{1}{4}$ <u>ne</u> $\frac{1}{4}$	<u>24</u>	<u>T 20 S</u>	<u>R9W E/W</u>

Distance and direction from nearest town or city? 5e 3s Chase, Ks. Street address of well if located within city?

2 WATER WELL OWNER: White & Ellis Drlg Inc.  
 RR#, St. Address, Box # : 401 E Douglas  
 City, State, ZIP Code : Wichita, Ks. 67202  
 Board of Agriculture, Division of Water Resources  
 Application Number: unknown

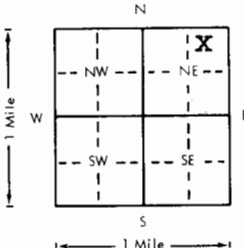
3 DEPTH OF COMPLETED WELL 55 ft. Bore Hole Diameter 8 in. to 55 ft. and \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Well Water to be used as:  
 1 Domestic 3 Feedlot 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Observation well 11 Injection well 12 Other (Specify below)  
 2 Irrigation 4 Industrial  
 Well's static water level 8 ft. below land surface measured on \_\_\_\_\_ month 4 day 80 year  
 Pump Test Data : Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Est. Yield 75 gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

4 TYPE OF BLANK CASING USED:  
 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) Casing Joints: Glued Clamped Welded Threaded  
 Blank casing dia 5 in. to 35 ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface 12 in., weight 2.8 lbs./ft. Wall thickness or gauge No sch 40

TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)  
 Screen or Perforation Openings Are:  
 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 11 None (open hole)  
 Screen-Perforation Dia 5 in. to \_\_\_\_\_ ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Screen-Perforated Intervals: From 35 ft. to 55 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 Gravel Pack Intervals: From 10 ft. to 55 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 0 ft. to 10 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy 7 Sewage lagoon 8 Feed yard 9 Livestock pens 10 Fuel storage 11 Fertilizer storage 12 Insecticide storage 13 Watertight sewer lines 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)  
 Direction from well se How many feet 65? Water Well Disinfected? Yes No  
 Was a chemical/bacteriological sample submitted to Department? Yes No If yes, date sample was submitted \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year Pump Installed? Yes No  
 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 \_\_\_\_\_ month 4 day 80 year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186  
 This Water Well Record was completed on \_\_\_\_\_ month 3 day 27 year 80 under the business name of Kellys Waterwell Serv. by (signature) Kelly Price

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	8	Top Soil-Clay			
	8	55	Sand-Gravel			

ELEVATION: unknown

Depth(s) Groundwater Encountered 1. 8 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.

OFFICE USE ONLY  
T  
20  
R  
9  
EW  
SEC.  
24  
NW  
NE  
SW  
SE