

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>Stafford</u>	<u>SE 1/4 NE 1/4 SW 1/4</u>	<u>4</u>	<u>T 21 S</u>	<u>R 11 EW</u>

Distance and direction from nearest town or city? 9 3/4 N 6 1/2 E of Hudson
 Street address of well if located within city?

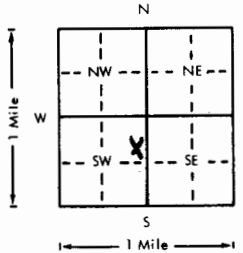
2 WATER WELL OWNER: Mustang Drilling
 RR#, St. Address, Box #: Box 1425
 City, State, ZIP Code: Great Bend, Ks. 67530
 Board of Agriculture, Division of Water Resources
 Application Number: T81-82

3 DEPTH OF COMPLETED WELL: 95 ft. Bore Hole Diameter: 11 in. to 95 ft., and in. to ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 7 Lawn and garden only 10 Observation well
 Well's static water level: 2.4 ft. below land surface measured on 2 month 13 day 81 year
 Pump Test Data: Well water was ft. after hours pumping gpm
 Est. Yield NA 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 Casing Joints: Glued Clamped
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded
 7 Fiberglass Threaded
 Blank casing dia: 5 in. to 7.5 ft., Dia in. to ft., Dia in. to ft.
 Casing height above land surface: 18 in., weight lbs./ft. Wall thickness or gauge No. 258
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 11 Other (specify)
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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-Perforation Dia: 5 in. to 9.5 ft., Dia in. to ft., Dia in. to ft.
 Screen-Perforated Intervals: From 7.5 ft. to 9.5 ft., From ft. to ft., From ft. to ft.
 Gravel Pack Intervals: From 10 ft. to 9.5 ft., From ft. to ft., From ft. to ft.

5 GROUT MATERIAL: 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 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 16 Other (specify below)
 3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines
 Direction from well: South How many feet: 75? Water Well Disinfected? Yes HTH No
 Was a chemical/bacteriological sample submitted to Department? Yes No XXXXX If yes, date sample was submitted month day year: Pump Installed? Yes No XXX
 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 2 month 13 day 81 year, and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134
 This Water Well Record was completed on 2 month 19 day 81 year under the business name of Rosencrantz-Bemis by (signature) Joia Dodson

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	
			0	10	Sandy top soil			
			10	30	Clay			
			30	40	Sand and gravel			
			40	50	Sandy clay			
			50	90	Sandy gravel w/ streaks of clay			
		90	95	Clay				

ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 2.4 ft. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100. 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
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EMO
SEC
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SE
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