

<b>1 LOCATION OF WATER WELL</b>		Fraction	Section Number	Township Number	Range Number
County: <u>STAFFORD</u>		$\frac{1}{4}$ C $\frac{1}{4}$ SW $\frac{1}{4}$	<u>25</u>	T <u>21</u> S	R <u>12</u> E/W
Distance and direction from nearest town or city? <u>HUDSON BL 6M N/E NORTH SIDE</u>			Street address of well if located within city?		
<b>2 WATER WELL OWNER:</b> <u>L.D DRILLING CO INC</u>			Board of Agriculture, Division of Water Resources		
RR#, St. Address, Box #: <u>314</u>			Application Number:		
City, State, ZIP Code: <u>GREAT BEND, KS 67530</u>					
<b>3 DEPTH OF COMPLETED WELL:</b> <u>60</u> ft. Bore Hole Diameter: <u>90P</u> in. to . . . . . ft., and . . . . . in. to . . . . . ft.					
Well Water to be used as: <u>1</u> Domestic <u>3</u> Feedlot <u>5</u> Public water supply <u>8</u> Air conditioning <u>11</u> Injection well <u>2</u> Irrigation <u>4</u> Industrial <u>6</u> Oil field water supply <u>9</u> Dewatering <u>12</u> Other (Specify below) <u>7</u> Lawn and garden only <u>10</u> Observation well					
Well's static water level <u>18</u> ft. below land surface measured on <u>Jan</u> month <u>27</u> day <u>1981</u> year					
Pump Test Data <u>NONE</u> : Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm					
Est. Yield gpm: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm					
<b>4 TYPE OF BLANK CASING USED:</b>					
<u>1</u> Steel <u>3</u> RMP (SR)		<u>5</u> Wrought iron <u>8</u> Concrete tile		Casing Joints: Glued <u>KX</u> Clamped . . . . .	
<u>2</u> PVC <u>4</u> ABS		<u>6</u> Asbestos-Cement <u>9</u> Other (specify below)		Welded . . . . .	
<u>7</u> Fiberglass				Threaded. . . . .	
Blank casing dia <u>5</u> in. to <u>40</u> ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.					
Casing height above land surface <u>12</u> in., weight <u>26.5</u> lbs./ft. Wall thickness or gauge No. <u>214</u>					
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>					
<u>1</u> Steel <u>3</u> Stainless steel <u>5</u> Fiberglass		<u>8</u> RMP (SR)		<u>11</u> Other (specify) . . . . .	
<u>2</u> Brass <u>4</u> Galvanized steel <u>6</u> Concrete tile		<u>9</u> ABS		<u>12</u> None used (open hole)	
Screen or Perforation Openings Are: <u>1/8</u>					
<u>1</u> Continuous slot <u>3</u> Mill slot		<u>5</u> Gauzed wrapped		<u>8</u> Saw cut <u>11</u> None (open hole)	
<u>2</u> Louvered shutter <u>4</u> Key punched		<u>6</u> Wire wrapped		<u>9</u> Drilled holes	
<u>7</u> Torch cut		<u>10</u> Other (specify) . . . . .			
Screen-Perforation Dia. <u>5</u> in. to <u>60</u> ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.					
Screen-Perforated Intervals: From <u>40</u> ft. to <u>60</u> ft., From . . . . . ft. to . . . . . ft.					
Gravel Pack Intervals: From <u>30</u> ft. to <u>60</u> ft., From . . . . . ft. to . . . . . ft.					
<b>5 GROUT MATERIAL:</b>					
<u>1</u> Neat cement <u>2</u> Cement grout <u>3</u> Bentonite		<u>4</u> 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: <u>NONE</u>					
<u>1</u> Septic tank <u>4</u> Cess pool <u>7</u> Sewage lagoon		<u>10</u> Fuel storage		<u>14</u> Abandoned water well	
<u>2</u> Sewer lines <u>5</u> Seepage pit <u>8</u> Feed yard		<u>11</u> Fertilizer storage		<u>15</u> Oil well/Gas well	
<u>3</u> Lateral lines <u>6</u> Pit privy <u>9</u> Livestock pens		<u>12</u> Insecticide storage		<u>16</u> Other (specify below)	
<u>13</u> Watertight sewer lines					
Direction from well . . . . . How many feet . . . . . ? Water Well Disinfected? Yes . . . . . No <u>X</u>					
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: <u>1</u> Submersible <u>2</u> Turbine <u>3</u> Jet <u>4</u> Centrifugal <u>5</u> Reciprocating <u>6</u> Other					
<b>6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on <u>Jan</u> month <u>27</u> day <u>1981</u> year					
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>389</u>					
This Water Well Record was completed on <u>Feb</u> month <u>12</u> day <u>1981</u> year under the business name of <u>MYERS WATER WELL SERVICE</u> by (signature) <u>Rudolph J Reiser</u>					
<b>7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>		FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG	
		0 18 SOIL			
		18 48 FINE SAND			
		48 49 CLAY			
		49 60 GRAVEL			
ELEVATION:					
Depth(s) Groundwater Encountered 1. . . . . 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.					