

1 LOCATION OF WATER WELL: County: Stafford	Fraction SE 1/4 NW 1/4 NW 1/4	Section Number 25	Township Number T 21 S	Range Number R 14W EW
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Distance and direction from nearest town or city street address of well if located within city?
2 N, 1 W of Seward, Kansas

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	Lobo Drilling Box 823 Greatr Bend Kansas 67530	Board of Agriculture, Division of Water Resources Application Number: Unknown
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: 65 ft. ELEVATION: Unknown
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Depth(s) Groundwater Encountered 1. **20** ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL **20** ft. below land surface measured on mo/day/yr **11/23/81**

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield **60** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter... **8** in. to **6.5** 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.....; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes _____ No _____

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: <u>Glued</u> _____ Clamped _____
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Blank casing diameter... **5** in. to **4.5** 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:	7 <u>PVC</u>	10 Asbestos-cement
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SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	8 <u>Saw cut</u>	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 **45** ft. to **65** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **10** ft. to **65** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL:	1 <u>Neat cement</u>	2 Cement grout	3 Bentonite	4 Other _____
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Grout 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 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 <u>Oil well/Gas well</u>
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below) _____
			13 Insecticide storage	

Direction from well? **South** How many feet? **60**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	35	Clay			
35	65	Sand and Gravel			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 11/23/81 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 (mo/day/yr) 12/31/81 under the business name of Kellys Water Well Service by (signature) <i>[Signature]</i>
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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 T 21 R 14 SEC 25 SE 1/4 NW 1/4 NW 1/4