

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Paumotu</u>		<u>SE 1/4 NE 1/4 SE 1/4</u>	<u>34</u>	<u>T 21 S</u>	<u>R 15 E/W</u>
Distance and direction from nearest town or city? <u>3 W, 1/2 N of Radium</u>			Street address of well if located within city?		

2 WATER WELL OWNER: <u>Mustang Drilling</u>		Board of Agriculture, Division of Water Resources Application Number: <u>T80-257</u>
RR#, St. Address, Box #: <u>Box 1425</u>		
City, State, ZIP Code: <u>Great Bend, Ko. 67530</u>		

3 DEPTH OF COMPLETED WELL: <u>60</u> ft. Bore Hole Diameter: <u>9</u> in. to <u>60</u> ft., and _____ in. to _____ ft.	
Well Water to be used as:	
1 Domestic 3 Feedlot 2 Irrigation 4 Industrial	5 Public water supply <u>6 Oil field water supply</u> 7 Lawn and garden only
8 Air conditioning 11 Injection well 9 Dewatering 12 Other (Specify below)	
Well's static water level: <u>22</u> ft. below land surface measured on <u>5</u> month <u>5</u> day <u>80</u> year	
Pump Test Data: Well water was _____ ft. after _____ hours pumping. _____ gpm	
Est. Yield <u>NA</u> gpm: Well water was _____ ft. after _____ hours pumping. _____ gpm	

4 TYPE OF BLANK CASING USED:		5 Wrought iron		8 Concrete tile		Casing Joints: Glued <input checked="" type="checkbox"/> Clamped _____	
1 Steel		3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below)	
<u>2 PVC</u>		4 ABS		7 Fiberglass		Welded _____	
Blank casing dia <u>5</u> in. to <u>40</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.						Threaded _____	
Casing height above land surface: <u>24</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>258</u>							
TYPE OF SCREEN OR PERFORATION MATERIAL:		<u>7 PVC</u>		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		<u>8 Saw cut</u>		11 None (open hole)	
1 Continuous slot		3 Mill slot		6 Wire wrapped		9 Drilled holes	
2 Louvered shutter		4 Key punched		7 Torch cut		10 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. From _____ ft. to _____ ft.							
Gravel Pack Intervals: From <u>10</u> ft. to <u>60</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.							

5 GROUT MATERIAL: <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>N</u> How many feet <u>200</u>		10 Fuel storage		14 Abandoned water well		15 Oil well/Gas well	
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>NO</u>		11 Fertilizer storage		12 Insecticide storage		<u>16 Other (specify below)</u>	
If Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____		13 Watertight sewer lines		<u>tank battery</u>			
Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ gal./min.		? Water Well Disinfected? Yes <u>H.T.H.</u> No _____					
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 <u>constructed</u> (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month _____ day _____ year	
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>134</u>	
This Water Well Record was completed on _____ month _____ day _____ year under the business name of <u>Rosencrantz - Bemis</u> by (signature) <u>Rora Dodson</u>	

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	3	Top clay			
	3	10	Brown, grey & sandy clay			
	10	14	Grey sandy clay			
	14	24	Sand & gravel			
	24	27	tan clay			
27	46	Sand & gravel				
46		tan clay				

ELEVATION:	
Depth(s) Groundwater Encountered 1. <u>22</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.