

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	<del>Pawnee</del>	SE $\frac{1}{4}$ NE $\frac{1}{4}$ NW $\frac{1}{4}$	30	T 21 S	R 19W E/W

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Distance and direction from nearest town or city street address of well if located within city?

LN, 3W of Rozel, KS

2 WATER WELL OWNER: G. R. Powers  
C/O Mark Powers  
RR#, St. Address, Box # : 8626 E. 59th  
City, State, ZIP Code : Kansas City, MO 64129

Board of Agriculture, Division of Water Resources  
Application Number: 24840

<p><b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b></p> <div style="text-align: center;"> <p>N</p> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="padding: 5px;">-- NW --</td> <td style="text-align: center; padding: 5px;">X</td> <td style="padding: 5px;">-- NE --</td> </tr> <tr> <td style="padding: 5px;">W</td> <td style="border: none;"></td> <td style="padding: 5px;">E</td> </tr> <tr> <td style="padding: 5px;">-- SW --</td> <td style="padding: 5px;">-- SE --</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: center; padding: 5px;">S</td> </tr> </table> </div>	-- NW --	X	-- NE --	W		E	-- SW --	-- SE --		S			<p><b>4 DEPTH OF COMPLETED WELL</b> <u>123</u> ft. <b>ELEVATION:</b> <u>unknown</u></p> <p>Depth(s) Groundwater Encountered    1 <u>55</u> ft. 2 _____ ft. 3 _____ ft.</p> <p><b>WELL'S STATIC WATER LEVEL</b> <u>55</u> ft. below land surface measured on mo/day/yr <u>09/21/05</u></p> <p>Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm</p> <p>Est. Yield <u>825</u> gpm Well water was _____ ft. after _____ hours pumping _____ gpm</p> <p><b>WELL WATER TO BE USED AS:</b></p> <table style="width: 100%;"> <tr> <td>1 Domestic</td> <td>3 Feedlot</td> <td>5 Public water supply</td> <td>8 Air conditioning</td> <td>11 Injection well</td> </tr> <tr> <td>2 Irrigation</td> <td>4 Industrial</td> <td>6 Oil field water supply</td> <td>9 Dewatering</td> <td>12 Other (Specify below)</td> </tr> <tr> <td colspan="2"></td> <td>7 Domestic (lawn &amp; garden)</td> <td>10 Monitoring well</td> <td></td> </tr> </table> <p>Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted _____</p> <p style="text-align: right;">Water Well Disinfected? Yes _____ <u>No</u> _____</p>	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 Domestic (lawn & garden)	10 Monitoring well	
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5	TYPE OF BLANK CASING USED:	3 Wrought iron	8 Concrete tile	CASING JOINTS: Glued .....	Clamped .....
	1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below) .....	Welded .....
	<u>2 PVC</u>	4 ABS	7 Fiberglass	.....	Threaded .....
	Blank casing diameter ..... <u>16</u> .....	in. to <u>93</u> .....	ft. Dia .....	in. to .....	ft. Dia .....
	Casing height above land surface ..... <u>12</u> .....	in., weight ..... <u>16.5</u> .....	lbs./ft.	Wall thickness or guage No. <u>Sch. 40</u>	
	TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC	10 Asbestos-Cement	
	1 Steel	3 Stainless Steel	5 Fiberglass	<u>8 RMP (SR)</u>	11 Other (Specify) .....
	2 Brass	4 Galvanized Steel	6 Concrete tile	9 ABS	12 None used (open hole)
	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) .....	ft.
	SCREEN-PERFORATED INTERVALS:		From ..... <u>93</u> .....	ft. to <u>128</u> .....	ft. From .....
			From .....	ft. to .....	ft. From .....
	GRAVEL PACK INTERVALS:		From ..... <u>20</u> .....	ft. to <u>74</u> .....	ft. From ..... <u>75</u> .....
			From .....	ft. to ..... <u>128</u> .....	ft. From .....
			From .....	ft. to .....	ft. From .....

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other.....  
Grout Intervals: From 0 ft. to 19 (2) ft., From 19 ft. to 20 (3) ft., From 74 ft. to 75 (3) 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 Oil well/Gas well  
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)  
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage none - in field.....  
Direction from well? How many feet?

[illegible]

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) .....09/23/05..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No .....136..... This Water Well Record was completed on (mo/day/yr) .....09/26/05..... under the business name of Kelly's Water Well Service, Inc. by (signature) \_\_\_\_\_

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, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.