

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <b>PARTER</b>		<b>SE</b> 1/4 <b>SW</b> 1/4 <b>SE</b> 1/4	<b>19</b>	T <b>21</b> S	R <b>20</b> E/W
Distance and direction from nearest town or city street address of well if located within city? <b>1 1/2 mile west of BURDET, KS.</b>					

  

2 WATER WELL OWNER: <b>DALE BROWLEE</b>		Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # : <b>821 MANN</b>		Application Number:
City, State, ZIP Code : <b>LARNED, KS. 67550</b>		

  

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>	4 DEPTH OF COMPLETED WELL: <b>120</b> ft. ELEVATION: <b>VALLEY</b>	
	Depth(s) Groundwater Encountered 1. <b>55</b> ft. 2. <b>79</b> ft. 3. <b>110</b> ft.	
	WELL'S STATIC WATER LEVEL <b>55</b> ft. below land surface measured on mo/day/yr <b>12/30/82</b>	
	Pump test data: Well water was <b>56.5</b> ft. after <b>2</b> hours pumping <b>12</b> gpm	
	Est. Yield <b>60</b> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm	
Bore Hole Diameter <b>8</b> in. to <b>120</b> ft., and _____ in. to _____ ft.		
WELL WATER TO BE USED AS:		
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 <b>XX</b> ; If yes, mo/day/yr sample was submitted _____		
Water Well Disinfected? Yes <b>XX</b> No _____		

  

5 TYPE OF BLANK CASING USED:		5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <b>XX</b> Clamped _____
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded _____
<b>2 PVC</b>	4 ABS	7 Fiberglass		Threaded _____
Blank casing diameter <b>5</b> in. to <b>80</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.				
Casing height above land surface <b>12</b> in., weight _____ lbs./ft. Wall thickness or gauge No. <b>200 plus</b>				
TYPE OF SCREEN OR PERFORATION MATERIAL:		<b>7 PVC</b>	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	8 Saw cut	
1 Continuous slot	<b>3 Mill slot</b>	6 Wire wrapped	9 Drilled holes	
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS: From <b>80</b> ft. to <b>120</b> ft., From _____ ft. to _____ ft.				
GRAVEL PACK INTERVALS: From <b>15</b> ft. to <b>120</b> ft., From _____ ft. to _____ ft.				

  

6 GROUT MATERIAL:		1 Neat cement	2 Cement grout	3 Bentonite	4 Other _____
Grout Intervals: From <b>5</b> ft. to <b>15</b> ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:		10 Livestock pens			
1 Septic tank	4 Lateral lines	7 Pit privy	11 Fuel storage		
2 Sewer lines	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage		
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage		
		14 Abandoned water well			
		15 Oil well/Gas well			
		16 Other (specify below) <b>HILL</b>			
Direction from well?		How many feet?			

  

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	4	black topsoil			
4	16	brown clay			
16	30	tan clay & white rock			
30	39	light gray clay			
39	54	blue clay turning green			
54	78	sand good & clean			
78	79	strip of blue clay			
79	107	good sand			
107	110	tan clay			
110	116	dark sand			
116	140	green clay & sand turning gray			

  

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) <b>DEC. 26, 1981</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>243</b> This Water Well Record was completed on (mo/day/yr) <b>DEC. 30, 1981</b> under the business name of <b>DEAN WATERHOUSE DRILLING</b> by (signature) <i>Dean Waterhouse</i>	
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

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EW

SEC.

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SE

1/4

SW

1/4

SE

1/4