

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <u>Dawnee</u>		SE 1/4 NE 1/4 NW 1/4		20		T 21 S		R 20 EW	
Distance and direction from nearest town or city street address of well if located within city? <u>3/4 North, 1 1/2 west of Burdett, Ks.</u>									
2 WATER WELL OWNER:		Robert Smith							
RR#, St. Address, Box # :		140 Sleepy valley							
City, State, ZIP Code :		Mission, Tex.							
		Board of Agriculture, Division of Water Resources Application Number: <u>27434</u>							
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>117</u> ft. ELEVATION: .....							
		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.							
		WELL'S STATIC WATER LEVEL <u>50</u> ft. below land surface measured on mo/day/yr <u>1-11-90</u>							
		Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm							
		Est. Yield <u>675</u> gpm: Well water was <u>110</u> ft. after <u>2</u> hours pumping <u>675</u> gpm							
		Bore Hole Diameter <u>29</u> in. to <u>117</u> 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) <u>2 Irrigation</u> 4 Industrial    7 Lawn and garden only    10 Monitoring well							
		Was a chemical/bacteriological sample submitted to Department? Yes.....No <u>X</u> .....; If yes, mo/day/yr sample was submitted							
		Water Well Disinfected? Yes <u>hth</u> No							
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <u>X</u> Clamped .....							
1 Steel		3 RMP (SR)							
2 PVC		4 ABS							
Blank casing diameter <u>16</u> in. to <u>67</u> ft., Dia <u>87</u> to <u>97</u> in. to ..... ft., Dia ..... in. to ..... ft.		5 Wrought iron    8 Concrete tile    6 Asbestos-Cement    9 Other (specify below)    7 Fiberglass							
Casing height above land surface <u>12</u> in., weight <u>SDR32.5</u> lbs./ft. Wall thickness or gauge No. ....		Welded ..... Threaded .....							
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC    10 Asbestos-cement							
1 Steel		3 Stainless steel    5 Fiberglass    8 RMP (SR)    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    8 Saw cut    11 None (open hole)							
1 Continuous slot		6 Wire wrapped    9 Drilled holes							
2 Louvered shutter		7 Torch cut    10 Other (specify) .....							
4 Key punched									
SCREEN-PERFORATED INTERVALS: From <u>67</u> ft. to <u>87</u> ft., From <u>97</u> ft. to <u>117</u> ft.									
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>117</u> ft., From ..... ft. to ..... ft.									
6 GROUT MATERIAL:		1 Neat cement    2 Cement grout    3 Bentonite    4 Other .....							
Grout Intervals: From <u>0</u> ft. to <u>20</u> ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.									
What is the nearest source of possible contamination:		10 Livestock pens    14 Abandoned water well							
1 Septic tank		11 Fuel storage    15 Oil well/Gas well							
2 Sewer lines		12 Fertilizer storage    16 Other (specify below)							
3 Watertight sewer lines		13 Insecticide storage    none							
4 Lateral lines									
5 Cess pool									
6 Seepage pit									
7 Pit privy									
8 Sewage lagoon									
9 Feedyard									
Direction from well?		How many feet?							
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS				
0	2 1/2	Top soil							
2 1/2	33	Light brown clay							
33	35	Sand little brown clay							
35	48	Sand and gravel medium coarse							
48	60	Sand and gravel medium coarse loose							
60	68	Sand and gravel							
68	73	Sand and gravel with clay loose							
73	75	Caly with sand							
75	88	Sand and gravel							
88	94	Sand and gravel							
94	105	Clay							
105	116	Sand and gravel							
116	120	Fire clay							
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) <u>2-1-3-90</u> 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 (mo/day/yr) <u>7-25-90</u>									
under the business name of <u>Rosencrantz-Bemis</u> by (signature) <u>Fredia Dedson</u>									
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, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									