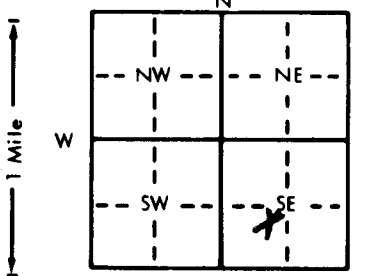


1 LOCATION OF WATER WELL: County: **HODGEMAN** Fraction: **NE 1/4 SW 1/4 SE 1/4** Section Number: **8** Township Number: **T 21 S** Range Number: **R 23 E (10)**

Distance and direction from nearest town or city street address of well if located within city? **9 mile north, 1 mile east, 1 mile north of JETMORE, KS.**

2 WATER WELL OWNER: **JACK STAIRRETT** RR#, St. Address, Box #: **RT. 2** City, State, ZIP Code: **JETMORE, KS. 67854** Board of Agriculture, Division of Water Resources Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL: **270** ft. ELEVATION: **UPLAND**
 Depth(s) Groundwater Encountered 1. **220** ft. 2. **250** ft. 3. **260** ft.
 WELL'S STATIC WATER LEVEL **153** ft. below land surface measured on mo/day/yr **OCT. 1, 1984**
 Pump test data: Well water was **212** ft. after **8** hours pumping **7** gpm
 Est. Yield **10** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter **8** in. to **270** 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 **XX**; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes **XX** No _____

5 TYPE OF BLANK CASING USED: 1 Steel 2 **PVC** 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) CASING JOINTS: Glued **XX** Clamped _____ Welded _____ Threaded _____
 Blank casing diameter **5** in. to **230** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **24** in., weight _____ lbs./ft. Wall thickness or gauge No **200 plus**
 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 **PVC (SDR 17)** 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) _____ 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 3 **Mill slot** 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 11 None (open hole) 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From **230** ft. to **270** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **10** ft. to **270** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 **Neat cement** 2 Cement grout 3 Bentonite 4 Other _____
 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 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 **Other (specify below)** **NIL**

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	black topsoil			
2	5	brown clay			
5	8	ssand			
8	25	yellow clay			
25	30	grey clay			
30	85	black shale			
85	100	grey shale			
100	205	soft blue shale			
205	220	light grey shale			
220	240	sandstone			
240	250	light grey shale			
250	275	sandstone			
275	260	light grey clay			
260	270	sandstone			
270	280	redbed			

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) **OCTOBER 5, 1984** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **243** This Water Well Record was completed on (mo/day/yr) **OCTOBER 16, 1984** under the business name of **DEAN WATERHOUSE DRILLING** by (signature) *Dean Waterhouse*

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.