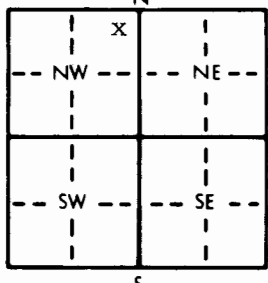


1 LOCATION OF WATER WELL: County: <u>Rice</u>	Fraction NE 1/4 NE 1/4 NW 1/4	Section Number <u>1</u>	Township Number T <u>21</u> S	Range Number R <u>9</u> <u>E/W</u>
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Distance and direction from nearest town or city street address of well if located within city?  
Approx. 3 miles north and 3 miles west of Sterling, KS

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	<u>Rodney Harrison</u> <u>Route 2 - Box 80</u> <u>Sterling, KS 67579</u>	Board of Agriculture, Division of Water Resources Application Number: <u>not available</u>
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: <u>54</u> ft. ELEVATION: <u>unknown</u>	Depth(s) Groundwater Encountered 1. <u>not ck'd</u> ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL <u>not ck'd</u> ft. below land surface measured on mo/day/yr _____ Pump test data: Well water was <u>not ck'd</u> ft. after _____ hours pumping _____ gpm Est. Yield <u>450</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter: <u>24</u> in. to <u>54</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) 2 <u>Irrigation</u> 4 Industrial    7 Lawn and garden only    10 Observation 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 _____ No <u>X</u>
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5 TYPE OF BLANK CASING USED:	1 <u>Steel</u> 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 _____ Clamped _____ Welded <u>X</u> Threaded _____
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Blank casing diameter 16 in. to 26 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface 12 in., weight 42.05 lbs./ft. Wall thickness or gauge No. 250

TYPE OF SCREEN OR PERFORATION MATERIAL:	1 <u>Steel</u> 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile	7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) _____ 12 None used (open hole)
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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 10 Other (specify) <u>Doerr Bridge Slot</u> 11 None (open hole)
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SCREEN-PERFORATED INTERVALS:	From <u>26</u> ft. to <u>54</u> ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS:	From <u>10</u> ft. to <u>54</u> ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.

6 GROUT MATERIAL:	1 <u>Neat cement</u> 2 Cement grout 3 Bentonite 4 Other _____	Grout Intervals: From <u>0</u> ft. to <u>10</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
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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) <u>field</u>
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Direction from well? \_\_\_\_\_ How many feet? no known source w/in 1/4 mile

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	14	Topsoil & sandy brown clay			
14	26	Sand & gravel, med. - coarse			
26	41	Sand & gravel - coarse			
41	46	■ Clay, tan & white			
46	51	Sand & gravel, medium			
51	54	Red 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>12/23/81</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>185</u> . This Water Well Record was completed on (mo/day/yr) <u>1/23/82</u> under the business name of <u>CLARKE WELL &amp; EQUIPMENT, INC.</u> by (signature) <u>[Signature]</u>
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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  
T  
R  
9  
EW  
SEC  
NE 1/4  
NE 1/4  
NW 1/4