

LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: <u>STAFFORD</u>		<u>NW 1/4 NW 1/4 SW 1/4</u>	<u>27</u>	<u>T 22 S</u>	<u>R 13 EW</u>		
Distance and direction from nearest town or city? <u>HUDSON 4 3/4 W 1/2 N EASTSIDE</u>			Street address of well if located within city?				
Water Well Owner: <u>L.D. DRILLING CO. INC.</u>			Board of Agriculture, Division of Water Resources Application Number: <u>T81-292</u>				
R#, St. Address, Box #: <u>BOX 324</u>							
City, State, ZIP Code: <u>GREAT BEND, KS 67530</u>							
DEPTH OF COMPLETED WELL: <u>70</u> ft. Bore Hole Diameter: <u>6 3/4</u> in. to <u>70</u> ft., and _____ in. to _____ ft.							
Well Water to be used as:							
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 Lawn and garden only		10 Observation well					
Well's static water level: <u>26</u> ft. below land surface measured on <u>MAY</u> month <u>9</u> day <u>1981</u> year							
Pump Test Data: <u>NONE</u> Well water was _____ ft. after _____ hours pumping _____ gpm							
Discharge Yield: _____ gpm Well water was _____ ft. after _____ hours pumping _____ gpm							
TYPE OF BLANK CASING USED:							
1 Steel 3 RMP (SR)		5 Wrought iron		8 Concrete tile Casing Joints: Glued ☒ Clamped _____			
2 PVC 4 ABS		6 Asbestos-Cement		9 Other (specify below) Welded _____			
3 Fiberglass				Threaded _____			
Casing dia: <u>4 1/2</u> in. to <u>50</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.							
Setting height above land surface: <u>12</u> in., weight <u>11.832</u> lbs./ft. Wall thickness or gauge No. <u>.190</u>							
MATERIAL OF SCREEN OR PERFORATION MATERIAL:							
1 Steel 3 Stainless steel		5 Fiberglass		7 PVC 10 Asbestos-cement			
2 Brass 4 Galvanized steel		6 Concrete tile		8 RMP (SR) 11 Other (specify) _____			
				12 None used (open hole)			
Screen or Perforation Openings Are: <u>1/8</u>							
1 Continuous slot 3 Mill slot		5 Gauzed wrapped		8 Saw cut 11 None (open hole)			
2 Louvered shutter 4 Key punched		6 Wire wrapped		9 Drilled holes			
7 Torch cut		10 Other (specify) _____					
Screen-Perforation Dia: <u>4 1/2</u> in. to <u>70</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.							
Screen-Perforated Intervals: From <u>50</u> ft. to <u>70</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
Gravel Pack Intervals: From <u>40</u> ft. to <u>70</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____							
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
What is the nearest source of possible contamination: <u>NONE</u>							
1 Septic tank 4 Cess pool		7 Sewage lagoon		10 Fuel storage 14 Abandoned water well			
2 Sewer lines 5 Seepage pit		8 Feed yard		11 Fertilizer storage 15 Oil well/Gas well			
3 Lateral lines 6 Pit privy		9 Livestock pens		12 Insecticide storage 16 Other (specify below)			
13 Watertight sewer lines							
Location from well _____ How many feet _____? Water Well Disinfected? Yes _____ No ☒							
Has a chemical/bacteriological sample submitted to Department? Yes _____ No ☒ If yes, date sample is submitted _____ month _____ day _____ year Pump Installed? Yes _____ No ☒							
Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____							
Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ gal./min.							
Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other _____							
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on <u>MAY</u> month <u>9</u> day <u>1981</u> year							
I certify this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>389</u>							
This Water Well Record was completed on <u>MAY</u> month <u>27</u> day <u>1981</u> year under the business name of <u>REISEN WATER WELL SERVICE INC.</u> by (signature) <u>[Signature]</u>							
LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		<u>0</u>	<u>7</u>	<u>SANDY SOIL</u>			
		<u>7</u>	<u>43</u>	<u>SANDY CLAY</u>			
		<u>43</u>	<u>70</u>	<u>GRAVEL</u>			
ELEVATION:							
Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)							
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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.							