

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>stafford</u>		<u>ne 1/4 ne 1/4 NW 1/4</u>	<u>7</u>	<u>T 22 S</u>	<u>R 14 E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1 mile south 1/2 west of Radium</u>					
2 WATER WELL OWNER:		Allen Drilling			
RR#, St. Address, Box # <u>Kirk Rugan</u>		Box 1389			
City, State, ZIP Code <u>Ellinwood Ks</u>		Great Bend Ks			
Board of Agriculture, Division of Water Resources Application Number: <u>T85 430</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>70</u> ft. ELEVATION: <u>5-10-85</u>			
		Depth(s) Groundwater Encountered 1. <u>17</u> ft. 2. <u>28</u> ft. 3. <u>5-10-85</u> ft.			
		WELL'S STATIC WATER LEVEL <u>28</u> ft. below land surface measured on mo/day/yr <u>5-10-85</u>			
		Pump test data: Well water was <u>na</u> ft. after <u>na</u> hours pumping <u>na</u> gpm			
		Est. Yield <u>na</u> gpm: Well water was <u>na</u> ft. after <u>na</u> hours pumping <u>na</u> gpm			
		Bore Hole Diameter <u>10</u> in. to <u>70</u> ft., and <u>na</u> in. to <u>na</u> ft.			
		WELL WATER TO BE USED AS:			
		1 Domestic 3 Feedlot <u>6 Oil field water supply</u> 9 Dewatering 11 Injection well 2 Irrigation 4 Industrial <u>7 Lawn and garden only</u> 10 Observation well 12 Other (Specify below)			
		Was a chemical/bacteriological sample submitted to Department? Yes <u>na</u> No <u>X</u> ; If yes, mo/day/yr sample was submitted <u>na</u>			
		Water Well Disinfected? Yes <u>na</u> No <u>hth</u>			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <u>X</u> Clamped <u>na</u>			
1 Steel		3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded <u>na</u>
2 PVC		4 ABS	7 Fiberglass		Threaded <u>na</u>
Blank casing diameter <u>5</u> in. to <u>50</u> ft., Dia <u>na</u> in. to <u>na</u> ft., Dia <u>na</u> in. to <u>na</u> ft.					
Casing height above land surface <u>1.8</u> in., weight <u>na</u> lbs./ft. Wall thickness or gauge No. <u>258</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC			
1 Steel		3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement
2 Brass		4 Galvanized steel	6 Concrete tile	9 ABS	11 Other (specify) <u>na</u>
SCREEN OR PERFORATION OPENINGS ARE:		12 None used (open hole)			
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	
SCREEN-PERFORATED INTERVALS: From <u>50</u> ft. to <u>70</u> ft., From <u>na</u> ft. to <u>na</u> ft., From <u>na</u> ft. to <u>na</u> ft.					
GRAVEL PACK INTERVALS: From <u>10</u> ft. to <u>70</u> ft., From <u>na</u> ft. to <u>na</u> ft., From <u>na</u> ft. to <u>na</u> ft.					
6 GROUT MATERIAL:		3 Bentonite			
1 Neat cement		2 Cement grout	4 Other <u>na</u>		
Grout Intervals: From <u>0</u> ft. to <u>10</u> ft., From <u>na</u> ft. to <u>na</u> ft., From <u>na</u> ft. to <u>na</u> ft.					
What is the nearest source of possible contamination:		10 Livestock pens			
1 Septic tank		4 Lateral lines	7 Pit privy	11 Fuel storage	14 Abandoned water well
2 Sewer lines		5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	15 Oil well/Gas well
3 Watertight sewer lines		6 Seepage pit	9 Feedyard	13 Insecticide storage	16 Other (specify below) <u>na</u>
Direction from well? <u>west</u>		How many feet? <u>130</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	top soil			
3	7	dark brown clay			
7	15	light gray clay			
15	17	light gray sandy clay			
17	27	fine sand			
27	50	medium sand and gravel			
50	51	yellow clay			
51	67	sand and gravel			
67	71	yellow brown 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>5-10-85</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>5-15-85</u> under the business name of <u>Rosenkrantz-Bemis</u> by (signature) <u>Freda Nelson</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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					