

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Stafford</u>		$\frac{1}{4}$ <u>cnw</u> $\frac{1}{4}$ <u>ne</u> $\frac{1}{4}$	<u>26</u>	<u>T</u> <u>22</u> <u>S</u>	<u>R</u> <u>14W</u> <u>E/W</u>
Distance and direction from nearest town or city? <u>4s 3$\frac{1}{2}$e Radium, Ks.</u>			Street address of well if located within city?		

2 WATER WELL OWNER: <u>Faron Brown</u>		Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # : <u>R1</u>		Application Number: <u>none</u>
City, State, ZIP Code : <u>St. John, Ks. 67576</u>		

3 DEPTH OF COMPLETED WELL: <u>67</u> ft. Bore Hole Diameter: <u>8</u> in. to <u>67</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 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well
Well's static water level: <u>27</u> ft. below land surface measured on _____ month <u>16</u> day <u>80</u> year	
Pump Test Data	Well water was _____ ft. after _____ hours pumping _____ gpm
Est. Yield <u>75</u> gpm	Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:		5 Wrought iron	8 Concrete tile	Casing Joints: <u>Glued</u> _____ Clamped _____
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded _____
2 PVC	4 ABS	7 Fiberglass		Threaded _____
Blank casing dia: <u>5</u> in. to <u>47</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.				
Casing height above land surface: <u>12</u> in., weight <u>2.8</u> lbs./ft. Wall thickness or gauge No. <u>sch 40</u>				
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC	10 Asbestos-cement	
1 Steel	3 Stainless steel	8 RMP (SR)	11 Other (specify)	
2 Brass	4 Galvanized steel	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	3 Mill slot	6 Wire wrapped	9 Drilled holes	
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify)	
Screen-Perforation Dia: <u>5</u> in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.				
Screen-Perforated Intervals:	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	
Gravel Pack Intervals:	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	

5 GROUT MATERIAL:		1 Neat cement	2 Cement grout	3 Bentonite	4 Other _____
Grouted Intervals: From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:		10 Fuel storage	14 Abandoned water well		
1 Septic tank	4 Cess pool	7 Sewage lagoon	11 Fertilizer storage	15 Oil well/Gas well	
2 Sewer lines	5 Seepage pit	8 Feed yard	12 Insecticide storage	16 Other (specify below)	
3 Lateral lines	6 Pit privy	9 Livestock pens	13 Watertight sewer lines		
Direction from well: <u>S</u>	How many feet: <u>60</u>	Water Well Disinfected? <u>Yes</u> _____ No _____			
Was a chemical/bacteriological sample submitted to Department? <u>Yes</u> _____ No _____		If yes, date sample was submitted _____ month _____ day _____ year		Pump Installed? <u>Yes</u> _____ No _____	
If Yes: Pump Manufacturer's name: <u>Goulds</u>		Model No. <u>25e1</u>		HP <u>1$\frac{1}{2}$</u> Volts <u>230</u>	
Depth of Pump Intake: <u>50</u> ft.		Pumps Capacity rated at: <u>25</u> gal./min.			
Type of pump:	1 Submersible	2 Turbine	3 Jet	4 Centrifugal	5 Reciprocating
					6 Other _____

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) <u>reconstructed</u> , or (3) <u>plugged</u> under my jurisdiction and was completed on _____ month <u>18</u> day <u>80</u> year _____	
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>186</u>	
This Water Well Record was completed on _____ month <u>5</u> day <u>80</u> year _____ under the business name of <u>Kellys Waterwell Serv.</u> by (signature) <u>Kelly Price</u>	

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	37	Top Soil-Clay			
	37	44	Sand			
	44	48	Clay			
	48	67	Sand-Gravel			

ELEVATION: <u>unknown</u>	Depth(s) Groundwater Encountered: 1. <u>37</u> ft. 2. _____ ft. 3. _____ ft. 4. _____ ft.	(Use a second sheet if needed)
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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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.