

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Lawrence</u>		<u>SW 1/4 SW 1/4 NW 1/4</u>	<u>27</u>	<u>T 22 S</u>	<u>R 16 EW</u>
Distance and direction from nearest town or city? <u>4 South - East of Larned, KS</u>			Street address of well if located within city?		
2 WATER WELL OWNER: <u>John Holloway</u>					
RR#, St. Address, Box #: <u>912 West 4th</u>					
City, State, ZIP Code: <u>Larned, KS 67550</u>					
Board of Agriculture, Division of Water Resources Application Number:					
3 DEPTH OF COMPLETED WELL <u>150</u> ft. Bore Hole Diameter <u>12 1/4</u> in. to <u>150</u> ft., and . . . . . in. to . . . . . ft.					
Well Water to be used as:					
0 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>40</u> ft. below land surface measured on <u>12</u> month <u>21</u> day <u>79</u> year					
Pump Test Data <u>NA</u> : Well water was . . . . . ft. after . . . . . hours pumping. . . . . gpm					
Est. Yield . . . . . gpm: Well water was . . . . . ft. after . . . . . hours pumping. . . . . gpm					
4 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Casing Joints: Glued <input checked="" type="checkbox"/> Clamped . . . . .
0 PVC		4 ABS	7 Fiberglass		Welded . . . . .
Blank casing dia <u>6 1/2</u> in. to <u>90</u> ft., Dia <u>6 1/2</u> in. to <u>110.6 130</u> ft., Dia . . . . . in. to . . . . . ft.					
Casing height above land surface <u>12</u> in., weight . . . . . lbs./ft. Wall thickness or gauge No. <u>280</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
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)
12 None used (open hole)					
Screen or Perforation Openings Are:					
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>6 1/2</u> in. to <u>130</u> ft., Dia <u>150</u> in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.					
Screen-Perforated Intervals: From <u>90</u> ft. to <u>110</u> ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.					
Gravel Pack Intervals: From <u>10</u> ft. to <u>150</u> ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.					
5 GROUT MATERIAL: 0 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:					
0 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)
Direction from well <u>South</u> How many feet <u>125'</u> ? Water Well Disinfected? Yes <u>HTH</u> No					
Was a chemical/bacteriological sample submitted to Department? Yes <u>X</u> No . . . . . If yes, date sample					
was submitted <u>12</u> month <u>21</u> day <u>79</u> year: Pump Installed? Yes <input checked="" type="checkbox"/> No					
If Yes: Pump Manufacturer's name <u>Red Jacket</u> Model No. <u>MB-6</u> HP <u>5</u> Volts <u>230</u>					
Depth of Pump Intake <u>10.5</u> ft. Pumps Capacity rated at <u>12.5</u> gal./min.					
Type of pump: 0 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other					
6 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>12</u> month <u>21</u> day <u>79</u> year					
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 <u>1</u> month <u>3</u> day <u>80</u> year under the business					
name of <u>Rosenkrantz-Bemis</u> by (signature) <u>Freddie Rodson</u>					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG	
		0 2 top soil		123 135 fine sand	
		2 17 Brown clay		135 148 sand & gravel	
		17 21 fine sand			
		21 43 Brown clay			
		43 47 fine sand			
		47 51 Brown sandy clay			
		51 56 fine sand			
		56 60 Brown clay			
		60 68 yellow brown clay			
		68 103 sand & gravel			
103 123 Gray clay					
ELEVATION: <u>upland</u>					
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.					