

1 LOCATION OF WATER WELL: County: PAWNEE		Fraction: SW 1/4 SW 1/4 NE 1/4		Section Number: 4		Township Number: T 22 S		Range Number: R 18 E/W	
Distance and direction from nearest town or city street address of well if located within city? 10 M. West of Larned, 1 South, 1/2 West, 1/2 South									
2 WATER WELL OWNER: RR#, St. Address, Box #: RR3 LARNED KS 67550 City, State, ZIP Code					Board of Agriculture, Division of Water Resources Application Number: 8311				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL: 146 ft. ELEVATION: _____						
			Depth(s) Groundwater Encountered: _____ ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL: 35 ft. below land surface measured on mo/day/yr 18 Feb 1988 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter: _____ in. to _____ ft., and _____ in. to _____ ft. WELL WATER TO BE USED AS: 1 Domestic <input type="checkbox"/> 3 Feedlot <input type="checkbox"/> 5 Public water supply <input type="checkbox"/> 8 Air conditioning <input type="checkbox"/> 11 Injection well <input type="checkbox"/> 2 Irrigation <input checked="" type="checkbox"/> 4 Industrial <input type="checkbox"/> 6 Oil field water supply <input type="checkbox"/> 9 Dewatering <input type="checkbox"/> 12 Other (Specify below) _____ Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No _____						
			5 TYPE OF BLANK CASING USED: 1 Steel <input checked="" type="checkbox"/> 3 RMP (SR) <input type="checkbox"/> 5 Wrought iron <input type="checkbox"/> 8 Concrete tile <input type="checkbox"/> CASING JOINTS: Glued _____ Clamped _____ 2 PVC <input type="checkbox"/> 4 ABS <input type="checkbox"/> 6 Asbestos-Cement <input type="checkbox"/> 9 Other (specify below) _____ Welded _____ Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface: 18 in., weight _____ lbs./ft. Wall thickness or gauge No. _____ TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel <input checked="" type="checkbox"/> 3 Stainless steel <input type="checkbox"/> 5 Fiberglass <input type="checkbox"/> 8 RMP (SR) <input type="checkbox"/> 10 Asbestos-cement <input type="checkbox"/> 2 Brass <input type="checkbox"/> 4 Galvanized steel <input type="checkbox"/> 6 Concrete tile <input type="checkbox"/> 9 ABS <input type="checkbox"/> 11 Other (specify) _____ 12 None used (open hole) _____ SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot <input type="checkbox"/> 3 Mill slot <input type="checkbox"/> 5 Gauzed wrapped <input type="checkbox"/> 8 Saw cut <input type="checkbox"/> 11 None (open hole) <input type="checkbox"/> 2 Louvered shutter <input type="checkbox"/> 4 Key punched <input type="checkbox"/> 6 Wire wrapped <input type="checkbox"/> 9 Drilled holes <input type="checkbox"/> 7 Torch cut <input type="checkbox"/> 10 Other (specify) _____ 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.						
			6 GROUT MATERIAL: Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grout Intervals: From 146 ft. to 147 ft., From 146 ft. to 147 ft., From 146 ft. to 147 ft. What is the nearest source of possible contamination: 1 Septic tank <input type="checkbox"/> 4 Lateral lines <input checked="" type="checkbox"/> 7 Pit privy <input type="checkbox"/> 10 Livestock pens <input type="checkbox"/> 14 Abandoned water well <input type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 5 Cess pool <input type="checkbox"/> 8 Sewage lagoon <input type="checkbox"/> 11 Fuel storage <input type="checkbox"/> 15 Oil well/Gas well <input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 9 Feedyard <input type="checkbox"/> 12 Fertilizer storage <input type="checkbox"/> 16 Other (specify below) _____ 13 Insecticide storage <input type="checkbox"/> Direction from well? NORTHWEST How many feet? 2800						
			FROM TO LITHOLOGIC LOG			FROM TO PLUGGING INTERVALS			
146 35 Sand 154.9 C. Feet 35 31 N. Cement 5.58 C. Feet 31 20 Sand 27.9 C. Feet 20 16 No Cement 5.58 C. Feet 16 0 Sand 22.3 C. Feet									
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) 8-Dec-1988 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/year) _____ under the business name of _____ by (signature) Dean D. Dirks									