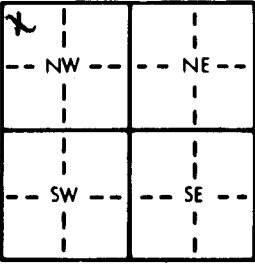


1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Pawnee</u>		<u>NW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$	<u>22</u>	<u>T</u> <u>22</u> <u>S</u>	<u>R</u> <u>19</u> <u>E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>4 1/2 south of Rozel</u>					
2 WATER WELL OWNER: <u>John Brack</u>					
RR#, St. Address, Box # : <u>Rozel, Ks.</u>					
City, State, ZIP Code : _____					
Board of Agriculture, Division of Water Resources Application Number: _____					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>150</u> ft. ELEVATION: _____			
<div style="text-align: center;">N W E S</div> 		Depth(s) Groundwater Encountered 1. <u>72</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>80</u> ft. below land surface measured on mo/day/yr <u>9-3-83</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>NA</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
Bore Hole Diameter. <u>10</u> in. to <u>150</u> ft., and _____ in. to _____ ft.		WELL WATER TO BE USED AS:			
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	
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> _____ If yes, mo/day/yr sample was submitted _____					
Water Well Disinfected? Yes <u>HTH</u> No _____					
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped _____
2 PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
			7 Fiberglass		Threaded _____
Blank casing diameter <u>5</u> in. to <u>130</u> ft. Dia. _____ in. to _____ ft. Dia. _____ in. to _____ ft.					
Casing height above land surface <u>18</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>25.8</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify) _____
2 Brass		4 Galvanized steel	6 Concrete tile	9 ABS	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-PERFORATED INTERVALS: From <u>130</u> ft. to <u>150</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>10</u> ft. to <u>150</u> ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 <u>Cement grout</u> 3 Bentonite 4 Other _____					
Grout 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:					
1 Septic tank		4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandoned water well
2 Sewer lines		5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines		6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
				13 Insecticide storage	
Direction from well? <u>east</u> How many feet? <u>90</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	5	Dark top soil			
5	45	41 Tan clay			
45	62	30 Tan sandy clay with white broken rock			
62	86	23 Dark brown and red sand stone w/broken rock			
86	138	30 Fire clay and dark brown sand stone streaks			
138	150	23 Sand stone			
150		41 Fire clay			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) <u>reconstructed</u> , or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>10-7-83</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>10-8-83</u> under the business name of <u>Rosencrantz-Remis Ent.</u> by (signature) <u>Abra Dodson</u>					
INSTRUCTIONS: Use typewriter or ball point pen, <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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.					