

1 LOCATION OF WATER WELL:		Fraction	Center	NE	Section Number	11	Township Number	T 22	S	R 7	E/W
County: <u>Reno</u>											
Distance and direction from nearest town or city street address of well if located within city? <u>1/2 E and 1 N of Nickerson</u>											
2 WATER WELL OWNER: <u>Mike Harrison</u> RR#, St. Address, Box # : <u>11014 W. 95th Avenue</u> City, State, ZIP Code : <u>Nickerson, KS 67561</u>						Board of Agriculture, Division of Water Resources Application Number: <u>42041</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:						4 DEPTH OF COMPLETED WELL:					
						Depth(s) Groundwater Encountered 1. <u>11</u> ft. 2. _____ ft. 3. _____ ft.					
						WELL'S STATIC WATER LEVEL <u>11</u> ft. below land surface measured on mo/day/yr <u>8-7-96</u>					
						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 <u>30</u> in. to <u>60</u> in. and _____ in. to _____ in.											
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) <u>(2) Irrigation</u> 4 Industrial 7 Lawn and garden only 10 Monitoring 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>X</u> No _____											
5 TYPE OF BLANK CASING USED:						CASING JOINTS: Glued <u>X</u> Clamped _____					
1 Steel 3 RMP (SR)						6 Asbestos-Cement 9 Other (specify below) _____ Welded _____					
<u>(2) PVC</u> 4 ABS						7 Fiberglass _____ Threaded _____					
Blank casing diameter <u>16</u> in. to <u>46</u> in. Dia _____ in. to _____ in. Dia _____ in. to _____ in.						Casing height above land surface <u>14</u> in. weight <u>suc 40</u> lbs./ft. Wall thickness or gauge No. <u>+500</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:						<u>(7) PVC</u> 10 Asbestos-cement					
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:						<u>(8) Saw cut</u> 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-PERFORATED INTERVALS: From <u>60</u> ft. to <u>46</u> ft., From _____ ft. to _____ ft.											
GRAVEL PACK INTERVALS: From <u>60</u> ft. to <u>20</u> ft., From _____ ft. to _____ ft.											
6 GROUT MATERIAL: 1 Neat cement <u>(2) Cement grout</u> 3 Bentonite 4 Other _____											
Grout intervals: From <u>0</u> ft. to <u>20</u> ft., From _____ ft. to _____ ft.											
What is the nearest source of possible contamination:						10 Livestock pens 14 Abandoned water well					
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well											
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) <u>NA</u>											
3 Watertight sewer lines 6 Seepage pit 9 Feedyard											
Direction from well? <u>NA</u>						How many feet?					
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS	
0		3		Top Soil							
3		8		Clay							
8		19 1/2		Sand							
19 1/2		21		Clay + Sand Mix							
21		22		Clay							
22		28		Sand + Gravel Small							
28		31		Sandy Clay							
31		37		Fine Gravel Med to coarse							
37		39		Sand + Gravel + Gravel							
39		45		Sand + Gravel							
45		46		Small Sand + Gravel							
46		66		Med. Sand + Gravel							
66				Red Bed							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , <u>(2) reconstructed</u> , or <u>(3) plugged</u> under my jurisdiction and was completed on (mo/day/year) <u>8-8-96</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>8-15-96</u> under the business name of <u>Brennerantz-Bemis Ent Inc</u> by (signature) <u>Doug Dodson</u>											

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS HARDLY AND PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-295-5545. Send one to WATER WELL OWNER and retain one for your records.