

OFFICE USE ONLY

T

23

R

12

EW

SEC.

2

W 1/4

SE 1/4

W 1/4

W 1/4

1 LOCATION OF WATER WELL
 County: Stafford Fraction NW 1/4 SE 1/4 W 1/4 Section Number 23 Township Number T 23 S Range Number R 12 E/W

Distance and direction from nearest town or city? 6 miles S Stafford Street address of well if located within city? 2 West 1/2 SO

2 WATER WELL OWNER: Harold Thole
 RR#, St. Address, Box #: Route 1
 City, State, ZIP Code: Stafford, KS 67578
 Board of Agriculture, Division of Water Resources
 Application Number:

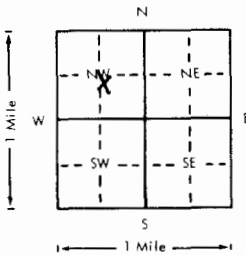
3 DEPTH OF COMPLETED WELL: 104 ft. Bore Hole Diameter: 28 in. to 104 ft., and _____ in. to _____ ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 Well's static water level: 9 ft. below land surface measured on _____ month 10 day 80 year
 Pump Test Data: Well water was 46 ft. after 1 hours pumping 1400 gpm
 Est. Yield 1800 gpm: Well water was 25 ft. after 2 hours pumping 600 gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued _____ Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing dia. 16 in. to 0 ft. Dia. 16 in. to 52 ft. Dia. _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight 30 lbs./ft. Wall thickness or gauge No. 3/4
 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-Perforation Dia. 16 in. to 104 ft. Dia. _____ in. to _____ ft. Dia. _____ in. to _____ ft.
 Screen-Perforated Intervals: From 52 ft. to 104 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 10 ft. to 104 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 0 ft. to 10 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 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: _____ How many feet: none ? Water Well Disinfected? Yes _____ No ✓
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No ✓ If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes ✓ No _____
 If Yes: Pump Manufacturer's name: WLR Model No. 45 Stage 12CH HP 80 HP Volts _____
 Depth of Pump Intake: 50 ft. Pumps Capacity rated at: 800 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) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on May month 10 day 1980 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134
 This Water Well Record was completed on May month 19 day 1980 year under the business name of Rosencrantz Bemis Ent. Inc. by (signature) Mike Flors

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Top soil			
3	16	Fine sand			
16	38	Clay			
38	42	Mod. Fine sand w/ clay			
42	47	Medium sand			
47	58	Clay			
58	60	Clay w/ very little sand			
60	63	Medium fine sand			
63	87	Medium sand, took water			
87	90	Medium sand w/ some clay			
ELEVATION:	90	105			

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.