

1 LOCATION OF WATER WELL: County: Stafford	Fraction SW 1/4 SE 1/4 NE 1/4	Section Number 16	Township Number T 23 S	Range Number R 13 E/W
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Distance and direction from nearest town or city street address of well if located within city?
Approximately 3 1/2 miles north of St. John

2 WATER WELL OWNER: **Big Bend GMD #5**
 RR#, St. Address, Box #: **P.O. Box 7**
 City, State, ZIP Code: **Stafford, KS 67578**
 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: **62** ft. ELEVATION: **unknown**
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL **6.83** ft. below land surface measured on **mo/day/yr 4-15-96**
 Pump test data: Well water was **not ch'd** ft. after _____ hours pumping _____ gpm
 Est. Yield **unknown** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter **5** in. to **7.6** in. to _____ in. to _____ in. to _____ ft.
 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)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well **Observation well**
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X**; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes _____ No **X**

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
 2 PVC 4 ABS 7 Fiberglass _____ Threaded _____
 Blank casing diameter **2 1/2** in. to **50** in. Dia _____ in. to _____ in. to _____ in. to _____ in. to _____ ft.
 Casing height above land surface **24** in., weight **70** lbs./ft. Wall thickness or gauge No. **154**
 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 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From **50** ft. to **60** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **30** ft. to **76** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: **30** 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Bentonite Holeplug
 Grout Intervals: From **30** ft. to **0** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From **0** ft. to **30** 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 **None known**

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Topsoil			
3	14	Clay, black, soft			
14	61	Sand and gravel, coarse, medium, fine, loose			
61	74	Clay, tan, hard			
74	76	Clay, red, hard			

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) **4-15-96** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **185** This Water Well Record was completed on (mo/day/yr) **5-14-96** under the business name of **Clarke Well & Equipment, Inc.** by (signature) *Clarke Well & Equipment*

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