

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number																																																																			
County: <u>Stafford</u>		NW 1/4 SE 1/4 SW 1/4		27		T 23 S		R 13 SW																																																																			
Distance and direction from nearest town or city street address of well if located within city? <u>Approx. 1/2 mile north of St. John, on Hwy, 281</u>																																																																											
2 WATER WELL OWNER: <u>Delp Tree Farm</u>																																																																											
RR#, St. Address, Box # : <u>Highway 281</u>																																																																											
City, State, ZIP Code : <u>St. John, KS 67576</u>																																																																											
Board of Agriculture, Division of Water Resources Application Number: <u>not available</u>																																																																											
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>85</u> ft. ELEVATION: <u>unknown</u>																																																																									
1 Mile		Depth(s) Groundwater Encountered 1. <u>18</u> ft. 2. _____ ft. 3. _____ ft.																																																																									
		WELL'S STATIC WATER LEVEL <u>18</u> ft. below land surface measured on mo/day/yr <u>8/5/81</u>																																																																									
		Pump test data: Well water was <u>not ck'd</u> ft. after _____ hours pumping _____ gpm																																																																									
		Est. Yield <u>unknown</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm																																																																									
		Bore Hole Diameter <u>24</u> in. to <u>85</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 _____ No <u>X</u>																																																																											
5 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) <u>Welded X</u>																																																																											
7 Fiberglass _____ Threaded _____																																																																											
Blank casing diameter <u>16</u> in. to <u>45</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.																																																																											
Casing height above land surface <u>12</u> in., weight <u>31.75</u> lbs./ft. Wall thickness or gauge No. <u>188</u>																																																																											
TYPE OF SCREEN OR PERFORATION MATERIAL:																																																																											
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement																																																																											
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____																																																																											
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) <u>Doerr Bridge Slot</u>																																																																											
SCREEN-PERFORATED INTERVALS: From <u>45</u> ft. to <u>85</u> ft., From _____ ft. to _____ ft.																																																																											
From _____ ft. to _____ ft., From _____ ft. to _____ ft.																																																																											
GRAVEL PACK INTERVALS: From <u>10</u> ft. to <u>86</u> ft., From _____ ft. to _____ ft.																																																																											
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6 GROUT MATERIAL: 1 <u>Neat cement</u> 2 Cement grout 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 _____ field																																																																											
Direction from well? <u>all</u> How many feet? _____																																																																											
<table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>FROM</th><th>TO</th><th>LITHOLOGIC LOG</th><th>FROM</th><th>TO</th><th>LITHOLOGIC LOG</th></tr></thead><tbody><tr><td>0</td><td>3</td><td>Sandy topsoil</td><td></td><td></td><td></td></tr><tr><td>3</td><td>10</td><td>Fine sand & gravel w/strks fine sand</td><td></td><td></td><td></td></tr><tr><td>10</td><td>30</td><td>Fine-med. sand & gravel</td><td></td><td></td><td></td></tr><tr><td>30</td><td>35</td><td>White & tan sandy clay</td><td></td><td></td><td></td></tr><tr><td>35</td><td>47</td><td>Fine-v.fine sand & gravel, thin streaks yellow clay 40-41</td><td></td><td></td><td></td></tr><tr><td>47</td><td>54</td><td>Fine-med. sand & gravel, thin strk yellow clay @ 51 51'</td><td></td><td></td><td></td></tr><tr><td>54</td><td>63</td><td>Fine sand & gravel, thin yellow clay streak 56,58'</td><td></td><td></td><td></td></tr><tr><td>63</td><td>72</td><td>Fine-med. sand & gravel, strks yellow clay 69-70'</td><td></td><td></td><td></td></tr><tr><td>72</td><td>84</td><td>Fine sand & gravel, some med.</td><td></td><td></td><td></td></tr><tr><td>84</td><td>86</td><td>Fine-med sand & gravel</td><td></td><td></td><td></td></tr></tbody></table>										FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	0	3	Sandy topsoil				3	10	Fine sand & gravel w/strks fine sand				10	30	Fine-med. sand & gravel				30	35	White & tan sandy clay				35	47	Fine-v.fine sand & gravel, thin streaks yellow clay 40-41				47	54	Fine-med. sand & gravel, thin strk yellow clay @ 51 51'				54	63	Fine sand & gravel, thin yellow clay streak 56,58'				63	72	Fine-med. sand & gravel, strks yellow clay 69-70'				72	84	Fine sand & gravel, some med.				84	86	Fine-med sand & gravel			
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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) <u>8/5/81</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>185</u> This Water Well Record was completed on (mo/day/yr) <u>9/27/81</u> under the business name of <u>Clarke Well & Eq., Inc.</u> by (signature) <u>[Signature]</u>																																																																											
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, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.																																																																											