

WALLS

OFFICE USE ONLY

T 23

R 14

EM

SEC

SW 1/4 SW 1/4 NE 1/4

1 LOCATION OF WATER WELL  
 County: STAFFORD Fraction: SW 1/4 SW 1/4 NE 1/4 Section Number: 9 Township Number: T 23 S Range Number: R 14 E 10

Distance and direction from nearest town or city? DILLWIN 1E 6 1/2 N WESTSIDE.  
 Street address of well if located within city?

2 WATER WELL OWNER: P.R. LAUCK OIL CO. INC.  
 RR#, St. Address, Box #: 221 S. BROADWAY SUITE 400  
 City, State, ZIP Code: WICHITA, KS 67202  
 Board of Agriculture, Division of Water Resources  
 Application Number:

3 DEPTH OF COMPLETED WELL: 82 ft. Bore Hole Diameter: 6 7/8 in. to 8 2 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)  
 7 Lawn and garden only 10 Observation well  
 Well's static water level: 55 ft. below land surface measured on MAY month 24 day 1981 year  
 Pump Test Data NONE Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

4 TYPE OF BLANK CASING USED:  
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued XY Clamped .....  
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded .....  
 7 Fiberglass Threaded .....  
 Blank casing dia: 4 1/2 in. to 6 2 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface: 12 in., weight 1.832 lbs./ft. Wall thickness or gauge No. 190  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 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: 1/8  
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)  
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....  
 Screen-Perforation Dia: 4 1/2 in. to 8 2 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Screen-Perforated Intervals: From 6 2 ft. to 8 2 ft., From ..... ft. to ..... ft.  
 Gravel Pack Intervals: From 5 2 ft. to 8 2 ft., From ..... ft. to ..... ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....  
 Grouted Intervals: From 0 ft. to 1 0 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 What is the nearest source of possible contamination: NONE  
 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)  
 13 Watertight sewer lines  
 Direction from well ..... How many feet .....? 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 ..... Model No. .... HP ..... Volts .....  
 Depth of Pump Intake ..... ft. Pumps Capacity rated at ..... 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 24 day 1981 year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 389  
 This Water Well Record was completed on APR month 7 day 1981 year under the business  
 name of REISER WATER WELL SERVICE INC by (signature) Rudolph J. Reiser

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	18	SANDY CLAY			
18	38	FINE SAND			
38	45	CLAY			
45	60	FINE SAND			
60	82	GRAVEL			

ELEVATION:

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.