

1 LOCATION OF WATER WELL: County: Pawnee		Fraction SW ¼ SE ¼ NE ¼	Section Number 28	Township Number T 23 S	Range Number R 15 EW
Distance and direction from nearest town or city street address of well if located within city? <u>Approx. 3 3/4 miles North of Macksville, KS</u>					
2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :		Terry Sallee Route 1 Macksville, KS 67557 Board of Agriculture, Division of Water Resources Application Number: not required			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL. 59 ft. ELEVATION: unknown			
		Depth(s) Groundwater Encountered 1. 19.5 ft. 2. . ft. 3. . ft. WELL'S STATIC WATER LEVEL 19.5 ft. below land surface measured on mo/day/yr 1/12/88 Pump test data: Well water was not ck'd ft. after . hours pumping gpm Est. Yield unknown gpm; Well water was . ft. after . hours pumping gpm Bore Hole Diameter . 9 in. to . 57 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...X.....; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes X No			
		5 TYPE OF BLANK CASING USED:			
		Blank casing diameter . 5 in. to . 47 ft., Dia . in. to . ft., Dia . in. to . ft. Casing height above land surface . 24 in., weight . 2, 277 lbs./ft. Wall thickness or gauge No. . 214			
		TYPE OF SCREEN OR PERFORATION MATERIAL:			
		SCREEN OR PERFORATION OPENINGS ARE:			
SCREEN-PERFORATED INTERVALS:					
GRAVEL PACK INTERVALS:					
annular fill					
6 GROUT MATERIAL:					
Grout Intervals: From . 4 ft. to . 20 ft., From . ft. to . ft., From . ft. to . ft.					
What is the nearest source of possible contamination:					
Direction from well? east How many feet? 150					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	44	Fine sand topsoil & sand & sandy tan & white clay			
44	57	Sand & gravel, fine to medium			
57		Clay, yellow, tan			
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) 1/12/88 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) 1/19/88 under the business name of Clarke WEll & Equipment, Inc. by (signature)					
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, Bureau of Water Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.					