

1 LOCATION OF WATER WELL: County: Edwards	Fraction SW 1/4 SW 1/4 NW 1/4	Section Number 22	Township Number T 23 S	Range Number R 19 EW
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Distance and direction from nearest town or city street address of well if located within city?
7 1/2 north of Kinsley

2 WATER WELL OWNER: **Jack Nolde**
 RR#, St. Address, Box # : **1021 East 22 St.**
 City, State, ZIP Code : **Hutchinson, Ks. 67501**
 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... **220** ft. ELEVATION: ft.
 Depth(s) Groundwater Encountered 1... **82** ft. 2..... ft. 3..... ft.
 WELL'S STATIC WATER LEVEL **117** ft. below land surface measured on (mo/day/yr) **6-27-83**
 Pump test data: Well water was ft. after hours pumping gpm
 Est. Yield ... **NA** gpm: Well water was ft. after hours pumping gpm
 Bore Hole Diameter... **1.0** in. to **2.20** ft., and 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 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 **HTH** No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued . . . x . . . Clamped . . .
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded . . .
 2 PVC 4 ABS 7 Fiberglass Threaded . . .
 Blank casing diameter . . . **5** in. to **200** ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.
 Casing height above land surface . . . **18** in., weight . . . lbs./ft. Wall thickness or gauge No. . . **258**
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
 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: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 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 . . . **200** ft. to . . . **220** ft., From . . . ft. to . . . ft.
 From . . . ft. to . . . ft., From . . . ft. to . . . ft.
 GRAVEL PACK INTERVALS: From . . . **10** ft. to . . . **220** ft., From . . . ft. to . . . ft.
 From . . . ft. to . . . ft., From . . . ft. to . . . ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other . . .
 Grout Intervals: From . . . **0** ft. to . . . **10** ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.
 What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage . . . **NONE**

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	5 01	Dark top soil	166	174 01	Gray clay
5	1230	Soft tan clay w/white broken rock	174	176 23	Sand stone
12	5801	Soft tan clay	176	201 01	Fire clay
58	64 01	Fire clay	201	207 23	Sand stone
64	66 23	Sand stone	207	217 01	Fire clay
66	97 01	Fire clay	217	220 23	Sand stone
97	99 23	Sand stone	220	01	Fire clay
99	127 01	Fire clay			
127	131 19	Coal and fire clay			
131	141 01	Fire clay			
141	144 23	Sand stone			
144	158 01	Fire clay			
158	161 23	Sand stone			
161	164 01	Fire clay			
164	166 23	Sand stone			

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) . . . **6-29-83** . . . 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 (mo/day/yr) . . . **7-18-83** . . . under the business name of **Rosencrantz-Bemis Ent.** by (signature) **Lora Dodson**

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.

OFFICE USE ONLY
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