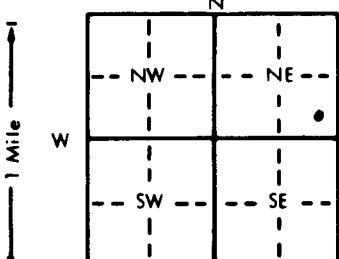


1 LOCATION OF WATER WELL: County: <u>HARVEY</u>		Fraction <u>SE 1/4 SE 1/4 NE 1/4</u>		Section Number <u>5</u>	Township Number <u>T 23 S</u>	Range Number <u>R 2 E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>4 MILE NORTH, 2 WEST OF HALSTEAD.</u>						
2 WATER WELL OWNER: <u>James NIGHTENGALE</u> RR#, St. Address, Box # : <u>2809 N. SPRING LAKE RD.</u> City, State, ZIP Code : <u>BURTON, KS 67020</u> 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: <u>70</u> ft. ELEVATION: _____ ft.				
<div style="text-align: center;"></div>		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.				
		WELL'S STATIC WATER LEVEL <u>20</u> ft. below land surface measured on mo/day/yr <u>09-22-99</u>				
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm				
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm				
		Bore Hole Diameter <u>9</u> in. to <u>70</u> 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 Monitoring 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 <u>X</u> No _____						
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)		Welded _____
Blank casing diameter <u>5</u> in. to <u>40</u> ft., Dia _____ in. to _____ ft.		7 Fiberglass				Threaded _____
Casing height above land surface <u>24</u> in., weight <u>160</u> lbs./ft. Wall thickness or gauge No. <u>214</u>						
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		8 RMP (SR)		11 Other (specify) _____
				9 ABS		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) _____		
SCREEN-PERFORATED INTERVALS: From <u>40</u> ft. to <u>70</u> ft., From _____ ft. to _____ ft.						
From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From <u>70</u> ft. to <u>19</u> 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 <u>HOLE PLUG</u>						
Grout Intervals: From <u>19</u> ft. to <u>0</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		
Direction from well? <u>NORTHEAST</u> How many feet? <u>120</u>						
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
0	3	TOP SOIL				
3	28	LIGHT GREY CLAY + REDISH TAN CLAY				
28	42	LIGHT GREY CLAY + SMALL SAND MIX				
42	47	DARK GREY CLAY WITH A LITTLE SAND				
47	63	MEDIUM TO SMALL SAND WITH A LITTLE CLAY				
63	67	CLAY, SAND, AND ROCK MIX 50/50				
67	70	TAN CLAY WITH SAND MIX 80/20				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) <u>reconstructed</u> , or (3) <u>plugged</u> under my jurisdiction and was completed on (mo/day/year) <u>09-22-99</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>134</u> This Water Well Record was completed on (mo/day/yr) <u>10-06-99</u> under the business name of <u>Rosencrantz-Bemis Ent.</u> by (signature) <u>James D. Denson</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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.						

OFFICE USE ONLY

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