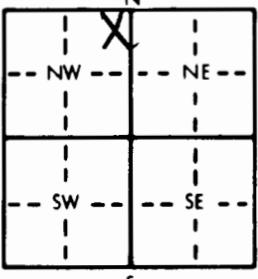


1 LOCATION OF WATER WELL: County: Dono Fraction: NE 1/4 NE 1/4 NW 1/4 Section Number: 27 Township Number: T 23 S Range Number: 6 E

Distance and direction from nearest town or city street address of well if located within city? 1/2 Mile West of Broadacres Road on Blanchard

2 WATER WELL OWNER: Ray Rose Board of Agriculture, Division of Water Resources  
RR#, St. Address, Box #: Hutchinson KS- 67501 Application Number: \_\_\_\_\_  
City, State, ZIP Code

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL: 40 ft. ELEVATION: \_\_\_\_\_  
Depth(s) Groundwater Encountered 1. \_\_\_\_\_ ft. 2. \_\_\_\_\_ ft. 3. \_\_\_\_\_ ft.  
WELL'S STATIC WATER LEVEL 22 ft. below land surface measured on mo/day/yr 9-6-91  
Pump test data: Well water was 25 ft. after 3 hours pumping \_\_\_\_\_ gpm  
Est. Yield 25 gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
Bore Hole Diameter 9 in. to 40 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 \_\_\_\_\_; If yes, mo/day/yr sample was submitted \_\_\_\_\_  
Water Well Disinfected? Yes 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 5 in. to 30 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
Casing height above land surface 14 in., weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No. SDR 26  
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 30 ft. to 40 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
GRAVEL PACK INTERVALS: From 30 ft. to 40 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other \_\_\_\_\_  
Grout Intervals: From 0 ft. to 20 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  
Direction from well? \_\_\_\_\_ How many feet? \_\_\_\_\_

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>8</u>	<u>Top Soil</u>			
<u>22</u>	<u>40</u>	<u>Sand med.</u>			

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) 9-6-91 and this record is true to the best of my knowledge and belief. Kansas  
Water Well Contractor's License No. 448 This Water Well Record was completed on (mo/day/yr) 9-7-93  
under the business name of Carl Vincent Services by (signature) Ken

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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.