

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Reno</u>		<u>N 1/4 SE 1/4 NE 1/4</u>	<u>1</u>	<u>T 23 S</u>	<u>R 9 E</u>
Distance and direction from nearest town or city?			Street address of well if located within city?		
2 WATER WELL OWNER:					
RR#, St. Address, Box # :			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code :			Application Number:		
3 DEPTH OF COMPLETED WELL <u>65</u> ft. Bore Hole Diameter <u>9 7/8</u> in. to _____ ft., and _____ in. to _____					
Well Water to be used as:					
1 Domestic 3 Feedlot		5 Public water supply		8 Air conditioning	
2 Irrigation 4 Industrial		6 Oil field water supply		9 Dewatering	
		7 Lawn and garden only		10 Observation well	
				11 Injection well	
				12 Other (Specify below)	
				<u>Research</u>	
Well's static water level <u>13.4</u> ft. below land surface measured on <u>Jan</u> month <u>29</u> day <u>1983</u> year					
Pump Test Data : Well water was _____ ft. after _____ hours pumping _____ gpr					
Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpr					
4 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
2 PVC		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
				8 Concrete tile	
				9 Other (specify below)	
				Casing Joints: <u>Glued</u> Clamped	
				Welded	
				Threaded.	
Blank casing dia <u>5.0</u> in. to <u>60</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____					
Casing height above land surface _____ in. weight _____ lbs. ft. Wall thickness or gauge No <u>Schd #40</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				7 Torch cut	
				8 Saw cut	
				9 Drilled holes	
				10 Other (specify)	
				11 None used (open hole)	
Screen or Perforation Openings Are:					
1 Continuous slot		3 Mill slot		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
				7 Torch cut	
				8 Saw cut	
				9 Drilled holes	
				10 Other (specify)	
Screen-Perforation Dia <u>5.0</u> in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____					
Screen-Perforated Intervals: From <u>60</u> ft. to <u>65</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
Gravel Pack Intervals: From <u>50</u> ft. to <u>65</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
5 GROUT MATERIAL: <u>1 Neat cement</u> 2 Cement grout 3 Bentonite 4 Other					
Grouted intervals: From <u>40</u> ft. to <u>50</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
What is the nearest source of possible contamination: <u>NONE KNOWN</u>					
1 Septic tank		4 Cess pool		7 Sewage lagoon	
2 Sewer lines		5 Seepage pit		8 Feed yard	
3 Lateral lines		6 Pit privy		9 Livestock pens	
				10 Fuel storage	
				11 Fertilizer storage	
				12 Insecticide storage	
				13 Watertight sewer lines	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below)	
Direction from well _____ How many feet _____ ? Water Well Disinfected? Yes <u>No</u>					
Was a chemical/bacteriological sample submitted to Department? Yes <u>No</u> If yes, date sample was submitted _____ month _____ day _____ year Pump Installed? Yes <u>No</u>					
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) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on <u>8</u> month <u>27</u> day <u>8/</u> year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on _____ month _____ day _____ year under the business name of _____ by (signature) _____					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG			
ELEVATION: <u>1620.1</u>					
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.

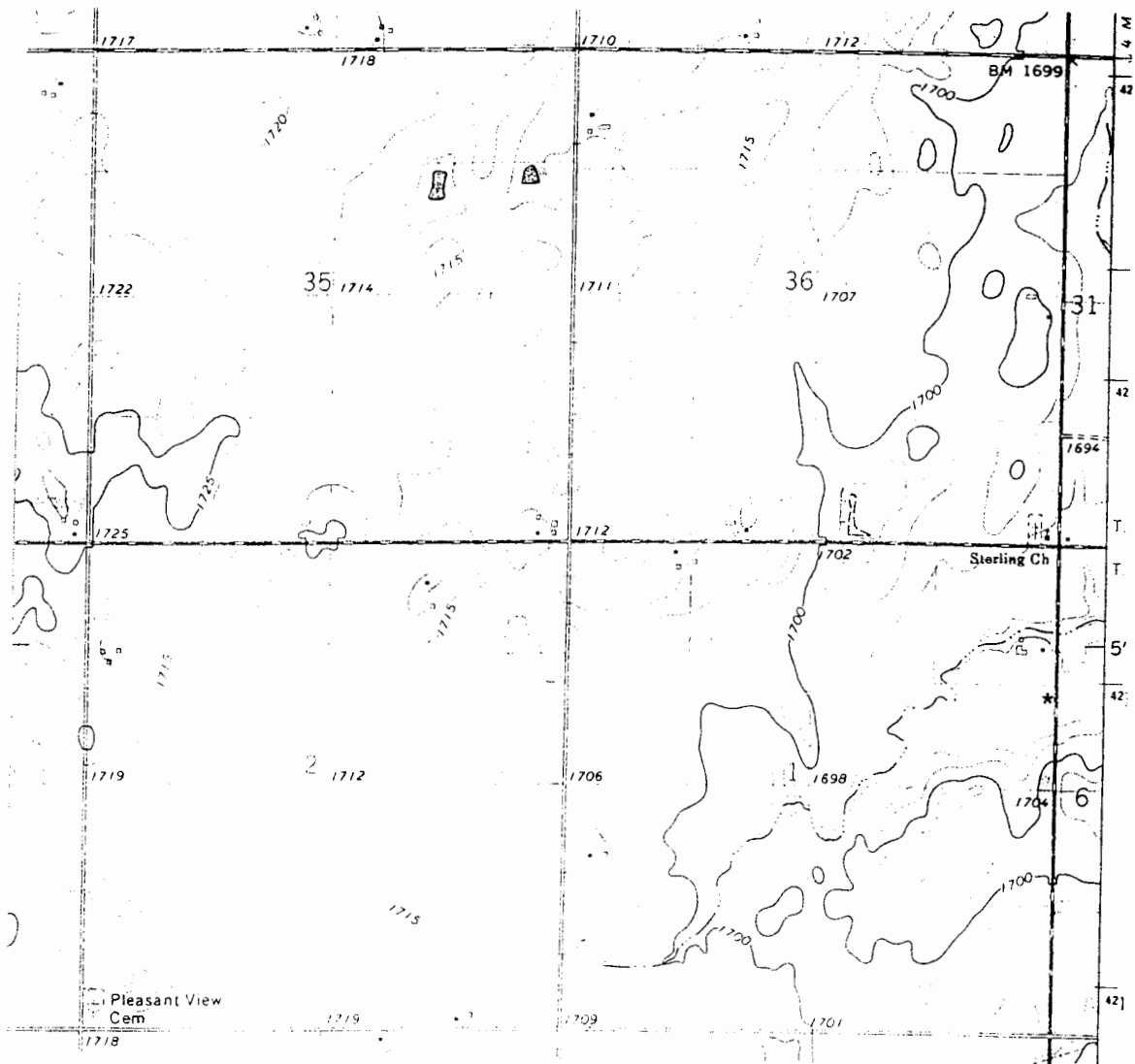
SITE NUMBER : 27
SITE LOCATION: NE NE NE

LEGAL LOCATION: 1-23-9W
COUNTY : RENO

[illegible]

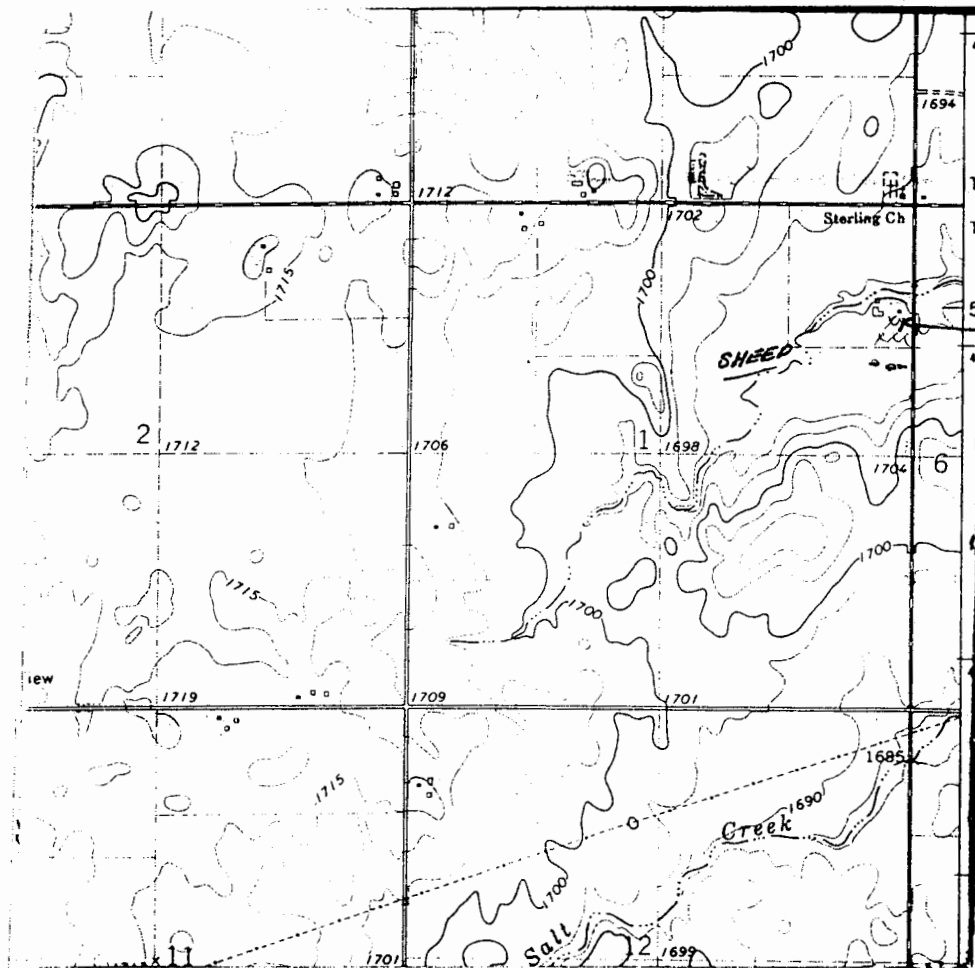
SITE NUMBER : 27
SITE LOCATION : NE SE NE
LEGAL LOCATION: SEC1 T23S R9W
COUNTY : RENO

LANDOWNER: DALE STUCKEY
ADDRESS : ABBYVILLE, KANSAS 67510
PHONE NO.: 316-286-5340



WELL LOCATION *

G. NE 1/4 Sec 1 T23S R9W RENO COUNTY



STUCKEY
RESIDENCE

#1-125
9-1-81
#2-65
8-27-81
#3-35
8-1-81

OWNER: DALE STUCKEY, Abbyville, Ks.
PH 1-286-5340

Permission given by owner on 7/27/81

★ Contact before drilling - owner will show
you where he wants the site installed
on NE 1/4. He will work with you to
select the site.