

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Stafford</u>		$\frac{1}{4}$ <u>N/C</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$	<u>20</u>	T <u>24</u> S	R <u>11</u> EW
Distance and direction from nearest town or city street address of well if located within city? <u>2 east, 3/4 south of Stafford, Ks.</u>					
2 WATER WELL OWNER: <u>Mike Wood</u>					
RR#, St. Address, Box # :		<u>RR 1 Box 59</u>		Board of Agriculture, Division of Water Resources	
City, State, ZIP Code :		<u>Haviland, Ks. 67059</u>		Application Number: <u>43,141</u>	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>119</u> ft. ELEVATION: _____			
		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>9-22-99</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>1000</u> gpm: Well water was <u>45</u> ft. after <u>2</u> hours pumping <u>800</u> gpm			
		Bore Hole Diameter <u>28</u> in. to <u>118</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 _____			
5 TYPE OF BLANK CASING USED:		Casing Joints: Glued <u>X</u> _____ Clamped _____			
1 Steel 3 RMP (SR)		5 Wrought iron 8 Concrete tile			
2 PVC 4 ABS		6 Asbestos-Cement 9 Other (specify below) _____			
Blank casing diameter _____ in. to _____ ft., Dia. _____ in. to _____ ft.		7 Fiberglass _____ to _____ Threaded _____			
Casing height above land surface _____ in., weight <u>XXX</u> Sch. <u>40</u> lbs./ft. Wall thickness or gauge No. _____					
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 <u>55</u> ft. to <u>70</u> ft., From <u>119</u> ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>118</u> ft. to <u>20</u> 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>20</u> ft. to <u>0</u> 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 <u>None</u>					
Direction from well? _____		How many feet? _____			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top soil	117	118	Hard clay
3	18	Brown and gray clay			
18	39	Brown and white clay			
39	51	Rusty orange sand and gravel with little clay			
51	53	Yellow brown clay			
53	68	Sand and gravel medium loose clean			
68	85	Brown and white clay			
85	87	Sandy brown clay and sand mixed			
87	92	Sand and gravel medium loose clean			
92	96	Brown and white clay			
96	100	Sand and gravel with clay			
100	102	Sandy clay			
102	110	Dark sand and gravel loose medium			
110	117	Sand and gravel dark lot of clay			
7 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 (mo/day/year) <u>9-24-99</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>9-28-99</u> under the business name of <u>Rosencrantz-Bemis</u> by (signature) <u>Freddie Hedson</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.					

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