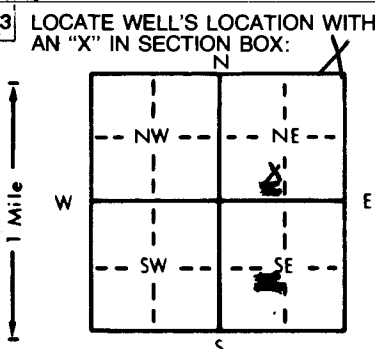


1 LOCATION OF WATER WELL: Fraction ~~SE~~ <sup>NE</sup> Section Number 1 Township Number T 24 S Range Number R 11 W E/W  
 County: Stafford

Distance and direction from nearest town or city street address of well if located within city?  
 Zeneth, 50 HW, County line, 2 1/2 N., & 990 W.

2 WATER WELL OWNER: Blackstone Drilling Company  
 RR#, St. Address, Box # : 523 Kansas Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : McPherson, Kansas 67460 Application Number: T 85-126



4 DEPTH OF COMPLETED WELL: 180. ft. ELEVATION:  
 Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft.  
 WELL'S STATIC WATER LEVEL . . . . . 50. ft. below land surface measured on mo/day/yr Jan. 28, 1985  
 Pump test data: Well water was . . . . . 65. ft. after . . . . . 1. hours pumping . . . . . 70. gpm  
 Est. Yield . . . 200. gpm: Well water was . . . . . 90. ft. after . . . . . 2. hours pumping . . . 130. gpm  
 Bore Hole Diameter . . . . . 6. in. to . . . . . 180. 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  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.  . . . . .; If yes, mo/day/yr sample was sub-  
 mitted Water Well Disinfected? Yes  No

5 TYPE OF CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued  Clamped . . . . .  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded . . . . .  
 PVC 4 ABS 7 Fiberglass . . . . . Threaded . . . . .  
 Blank casing diameter . . . . . 3. in. to . . . . . 0. ft., Dia . . . . . 3. in. to . . . . . 160ft., Dia . . . . . in. to . . . . . ft.  
 Casing height above land surface . . . . . in., weight . . . . . lbs./ft. Wall thickness or gauge No. . . . .

TYPE OF SCREEN OR PERFORATION MATERIAL:  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  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 . . . . . 160. ft. to . . . . . 180. ft., From . . . . . ft. to . . . . . ft.  
 From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  
 GRAVEL PACK INTERVALS: From . . . . . 10. ft. to . . . . . 180. ft., From . . . . . ft. to . . . . . ft.  
 From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.

6 GROUT MATERIAL:  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:  
 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 . . . . . None . . . . .

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	15	Bandy Top Soil			
15	21	Purple-gray Clay			
21	58	Tan Clay			
58	103	Sand and gravel			
103	142	Blue-gray Clay			
142	182	Sand and gravel			
182	185	Red Bed			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (X) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) January 28, 1985 . . . . . 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) January 28, 1985 . . . . . under the business name of Rosencrantz & Bemis Enterprise by (signature) Mike Flavers  
 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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