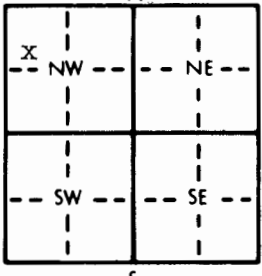


1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number		Range Number	
County: <u>Stafford</u>		<u>SW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$	<u>23</u>	<u>T</u> <u>24</u> <u>S</u>		<u>R</u> <u>11W</u> <u>E/W</u>	
Distance and direction from nearest town or city street address of well if located within city? <u>1.1 Mile West on 50 Hiway and $\frac{1}{2}$ South on the West Side.</u>							
2 WATER WELL OWNER:							
RR#, St. Address, Box # : <u>Earl Haynes</u>				Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : <u>Zenith, Kansas 67586</u>				Application Number: <u>T84-210</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>105</u> ft. ELEVATION:					
		Depth(s) Groundwater Encountered 1. <u>35</u> ft. 2. ft. 3. ft.					
		WELL'S STATIC WATER LEVEL <u>35</u> ft. below land surface measured on mo/day/yr					
		Pump test data: Well water was ft. after hours pumping gpm					
		Est. Yield <u>100</u> gpm: Well water was ft. after hours pumping gpm					
		Bore Hole Diameter <u>8</u> in. to <u>120</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 <u>6 Oil field water supply</u> 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 <u>X</u> If yes, mo/day/yr sample was submitted					
		Water Well Disinfected? Yes <u>HTH</u> No					
5 TYPE OF BLANK CASING USED:							
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <u>X</u> Clamped							
<u>2 PVC</u> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded							
7 Fiberglass Threaded							
Blank casing diameter <u>3</u> in. to <u>85</u> ft. Dia. in. to ft. Dia. in. to ft.							
Casing height above land surface <u>18</u> in., weight <u>160</u> lbs/ft. Wall thickness or gauge No. <u>216</u>							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement							
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify)							
12 None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:							
1 Continuous slot 3 Mill slot 5 Gauzed wrapped <u>8 Saw cut</u> 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>85</u> ft. to <u>105</u> ft. From ft. to ft.							
From ft. to ft. From ft. to ft.							
GRAVEL PACK INTERVALS: From <u>10</u> ft. to <u>105</u> ft. From ft. to ft.							
From ft. to ft. From ft. to ft.							
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other							
Grout Intervals: From <u>0</u> ft. to <u>10</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) <u>NONE</u>							
13 Insecticide storage							
Direction from well? How many feet?							
FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHOLOGIC LOG	
0	3	Top Soil					
3	47	Clay					
47	98	Medium Sand					
98	100	Clay Break					
100	105	Medium Sand					
105	-	Clay					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>04-11-84</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>04-25-84</u> under the business name of <u>Rosencrantz-Bemis Enterprises</u> by (signature) <u>Nancy L. Hanne Parker</u>							
INSTRUCTIONS: Use typewriter or ball point pen, PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underlining 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.							