

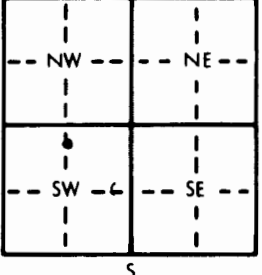
THOMPSON #1

1 LOCATION OF WATER WELL: Fraction 1/4 NW 1/4 SW 1/4 Section Number 24 Township Number T 24S Range Number R 11 E  
 County: STAFFORD

Distance and direction from nearest town or city street address of well if located within city?  
STAFFORD 5 1/2 E 1/2 S EASTSIDE.

2 WATER WELL OWNER: RON BROOK E. THOMPSON, PRATT, K.S.  
 RR#, St. Address, Box # 210 E 30th Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code HUTCHINSON, KS 67502 Application Number: 784-263

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 90 ft. ELEVATION: .....  
 Depth(s) Groundwater Encountered 1. 50 ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL 50 ft. below land surface measured on mo/day/yr 5.4.84  
 Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Bore Hole Diameter 7 7/8 in. to 90 ft., and ..... in. to ..... ft.  
 WELL WATER TO BE USED AS:  
 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 Observation 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 X Clamped .....  
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded .....  
 7 Fiberglass Threaded .....

Blank casing diameter 5 in. to 70 ft., Dia ..... in. to ..... ft.  
 Casing height above land surface 12 in., weight 2.65 lbs./ft. Wall thickness or gauge No. 214

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) .....

SCREEN OR PERFORATION OPENINGS ARE: 1/8  
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 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 70 ft. to 90 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 50 ft. to 90 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 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: NONE  
 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 .....

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	8	FINE SAND			
8	15	SANDY CLAY			
15	20	CLAY			
20	45	SANDY CLAY			
45	50	CLAY			
50	90	GRAVEL			

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) 5.4.84 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 389 This Water Well Record was completed on (mo/day/yr) 5.14.84 under the business name of REISER WATER WELL SERV. INC. by (signature) Rudolph J. Reiser  
 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  
T  
R  
EW  
SEC.