

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Stafford		NE 1/4 NW 1/4 NW 1/4		24		T 24 S		R 12 E	
Distance and direction from nearest town or city street address of well if located within city? 221 E. Martin Avenue, Stafford, Kansas									
2 WATER WELL OWNER: Frank Roush									
RR#, St. Address, Box # : P.O. Box 340									
City, State, ZIP Code : Stafford, Kansas 67578									
Board of Agriculture, Division of Water Resources Application Number:									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 25.0 ft. ELEVATION:							
		Depth(s) Groundwater Encountered 1 18.0 ft. 2 _____ ft. 3 _____ ft.							
		WELL'S STATIC WATER LEVEL 18.60 ft. below land surface measured on mo/day/yr 04/22/04							
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm							
		Est. Yield NA gpm: Well water was _____ ft. after _____ hours pumping _____ gpm							
		Bore Hole Diameter _____ in. to _____ ft. and _____ in. to _____ ft.							
WELL WATER TO BE USED AS:									
1 Domestic 3 Feed lot 6 Oil field water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 9 Dewatering 12 Other (Specify below) 10 Monitoring well									
Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____ If yes, mo/day/yr sample was submitted _____									
Water Well Disinfected? Yes _____ No X									
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass _____ Threaded X									
Blank casing diameter 2.375 in. to 10.0 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Casing height above land surface Flush Mount in., weight _____ lbs./ft. Wall thickness or gauge No. Schedule 40									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) 12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
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 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From 25.0 ft. to 10.0 ft. From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From 25.0 ft. to 8.0 ft. From _____ ft. to _____ ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____									
Grout Intervals From 0.0 ft. to 1.0 ft. From 1.0 ft. to 8.0 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									
Direction from well? South-Southeast How many feet? 220									
LITHOLOGIC LOG									
FROM	TO	CODE							
0.0	10.5		Dark brown very silty clay, laminated, hard-firm, slightly moist						
10.5	21.0		Red brown silty, clayey sand, mottled gray, hard-firm, dry-slightly moist, wet @18'						
21.0	25.0		Light red brown-gray silty sand, fine-medium grained, wet						
Flush-mount well completion approved by Don Taylor, KDHE-BOW.									
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/yr) 04/21/04 and this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's License No. 692 This Water Well Record was completed on (mo/day/yr) 04/30/04									
under the business name of Quad State Services, Inc. by (signature)									
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									

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