

1 LOCATION OF WATER WELL:		Fraction	Section Number		Township Number	Range Number	
County: Stafford		NE ¼ NW ¼ NW ¼	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				Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : Stafford, Kansas 67578				Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 29.0 ft. ELEVATION:					
		Depth(s) Groundwater Encountered 1 18.5 ft. 2 _____ ft. 3 _____ ft.					
		WELL'S STATIC WATER LEVEL 18.67 ft. below land surface measured on mo/day/yr 04/13/05					
		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: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) (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 _____ Blank casing diameter 2.375 in. to 9.0 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 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: 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 29.0 ft. to 9.0 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 29.0 ft. to 7.0 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 0.0 ft. to 1.5 ft. From 1.5 ft. to 7.0 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 (Former) 15 Oil well/ Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) _____ Direction from well? Northeast How many feet? 80							
FROM TO CODE LITHOLOGIC LOG							
0.0 0.5 Aggregate							
0.5 12.0 Red brown very silty clay, sandy, very firm, moist							
12.0 19.0 Red brown very silty clay, sandy-very sandy, very firm, slightly moist, wet @18.5', strong odor							
19.0 29.0 Gray brown clayey sand, silty, fine-medium grained, plastic, wet, slight-moderate odor							
Flush-mount well completion waiver existent for site.							
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) 04/13/05 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) 05/04/05 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.							