

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Stafford</u>		$\frac{1}{4}$ <u>N/C</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$	<u>19</u>	<u>T</u> <u>24</u> <u>S</u>	<u>R</u> <u>13</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>2 3/4 south, 1 1/2 west of St. John, Ks.</u>					
2 WATER WELL OWNER: <u>Golden Belt Feeders</u>		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box #: <u>PO BOX 307</u>		Application Number: <u>20,121</u>			
City, State, ZIP Code: <u>St. John, Ks. 67576</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>86</u> ft. ELEVATION: _____			
1 Mile		Depth(s) Groundwater Encountered: <u>1</u> ft. <u>2</u> ft. <u>3</u> ft.			
		WELL'S STATIC WATER LEVEL: <u>19</u> ft. below land surface measured on mo/day/yr <u>12-16-98</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield: <u>1100</u> gpm Well water was <u>38</u> ft. after <u>2</u> hours pumping <u>1100</u> gpm			
Bore Hole Diameter: <u>28</u> in. to <u>86</u> ft. and _____ in. to _____ ft.		WELL WATER TO BE USED AS:			
1 Domestic		3 Feedlot	6 Oil field water supply	8 Air conditioning	11 Injection well
2 Irrigation		4 Industrial	7 Lawn and garden only	9 Dewatering	12 Other (Specify below)
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 _____ No <u>X</u> _____					
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued _____ Clamped _____
2 PVC		4 ABS	7 Fiberglass		Welded <u>X</u> _____
Blank casing diameter: <u>1.6</u> in. to <u>46</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.		Threaded _____			
Casing height above land surface: <u>12</u> in., weight <u>SDR 32.5</u> lbs./ft. Wall thickness or gauge No. _____					
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	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 <u>46</u> ft. to <u>86</u> ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>86</u> ft. to <u>20</u> ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <u>hole plug</u>					
Grout intervals: From <u>20</u> ft. to <u>0</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)
				13 Insecticide storage	
Direction from well? <u>north</u> How many feet? <u>25'</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top soil			
3	6	Clay			
6	51	Sand & gravel			
51	62	Fine sand clay mixed			
62	71	Sand & gravel			
71	75	Clay sand, gravel mixed			
75	86	Sand & 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) <u>2-9-99</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>2-11-99</u> under the business name of <u>Rosencrantz-Bemis</u> by (signature) <u>Indira Hodson</u>					
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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					