

1 LOCATION OF WATER WELL: County: <u>Stafford</u>		Fraction <u>N</u> <u>C</u> <u>1/4</u> <u>NE</u> <u>1/4</u> <u>SE</u> <u>1/4</u>	Section Number <u>22</u>	Township Number <u>T</u> <u>24</u> <u>S</u>	Range Number <u>R</u> <u>14W</u> <u>E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>2 S, 1/2 E of Dlywn, Kansas</u>					
2 WATER WELL OWNER: <u>Fred White</u>		<u>Lobo Drilling Co.</u>		<u>White A-1</u>	
RR#, St. Address, Box #: <u>St. John, Ks.</u>		<u>Box 877</u>		Board of Agriculture, Division of Water Resources	
City, State, ZIP Code: <u>67576</u>		<u>Great Bend, Kansas 67530</u>		Application Number: <u>T88-472</u>	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>70</u> ft. ELEVATION: <u>Unknown</u>			
1 Mile		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 <u>9/13/88</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>60</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
Bore Hole Diameter <u>8</u> in. to <u>70</u> ft., and _____ in. to _____ ft.		WELL WATER TO BE USED AS:			
1 Domestic		3 Feedlot		6 <u>Oil field water supply</u>	
2 Irrigation		4 Industrial		7 Lawn and garden only	
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>_____</u>		If yes, mo/day/yr sample was submitted _____		Water Well Disinfected? Yes _____ No <u>_____</u>	
5 TYPE OF BLANK CASING USED:		5 Wrought iron		8 Concrete tile	
1 Steel		3 RMP (SR)		CASING JOINTS: <u>Glued</u> _____ Clamped _____	
<u>2 PVC</u>		6 Asbestos-Cement		9 Other (specify below) _____	
4 ABS		7 Fiberglass		Welded _____	
Blank casing diameter <u>5</u> in. to <u>50</u> ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.		Casing height above land surface <u>12</u> in., weight <u>2.8</u> lbs./ft. Wall thickness or gauge No. <u>Sch. 40</u>		Threaded _____	
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 <u>PVC</u>		10 Asbestos-cement	
1 Steel		3 Stainless steel		8 RMP (SR)	
2 Brass		4 Galvanized steel		9 ABS	
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped		8 <u>Saw cut</u>	
1 Continuous slot		3 Mill slot		9 Drilled holes	
2 Louvered shutter		4 Key punched		10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS: From <u>50</u> ft. to <u>70</u> ft., From _____ ft. to _____ ft.		6 Wire wrapped		11 None (open hole)	
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>70</u> ft., From _____ ft. to _____ ft.		7 Torch cut		12 None used (open hole)	
From _____ ft. to _____ ft., From _____ ft. to _____ ft.		8 Saw cut		11 None (open hole)	
From _____ ft. to _____ ft., From _____ ft. to _____ ft.		9 Drilled holes		10 Other (specify) _____	
From _____ ft. to _____ ft., From _____ ft. to _____ ft.		10 Other (specify) _____		11 None (open hole)	
6 GROUT MATERIAL: <u>1 Neat cement</u>		2 Cement grout		3 Bentonite	
Grout Intervals: From <u>0</u> ft. to <u>20</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		4 Other _____		5 Gauzed wrapped	
What is the nearest source of possible contamination:		6 Wire wrapped		8 Saw cut	
1 Septic tank		7 Pit privy		9 Drilled holes	
2 Sewer lines		8 Sewage lagoon		10 Other (specify) _____	
3 Watertight sewer lines		9 Feedyard		11 None (open hole)	
4 Lateral lines		10 Livestock pens		12 None used (open hole)	
5 Cess pool		11 Fuel storage		13 Insecticide storage	
6 Seepage pit		12 Fertilizer storage		14 Abandoned water well	
Direction from well? <u>South</u>		13 Insecticide storage		15 <u>Oil well/Gas well</u>	
How many feet? <u>60</u>		14 Abandoned water well		16 Other (specify below) _____	
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS		15 <u>Oil well/Gas well</u>		16 Other (specify below) _____	
0 35 Clay		16 Other (specify below) _____		17 Other (specify below) _____	
35 70 Sand and Gravel		17 Other (specify below) _____		18 Other (specify below) _____	
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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) 9/13/88 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186 This Water Well Record was completed on (mo/day/yr) 12/28/88 under the business name of Kelly's Water Well Service by (signature) Kelly's Water Well Service

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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.