

1 LOCATION OF WATER WELL: County: <u>Edwards</u>	Fraction <u>SE 1/4 NE 1/4 SW 1/4</u>	Section Number <u>17</u>	Township Number <u>T 24 S</u>	Range Number <u>R 17W EW</u>
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Distance and direction from nearest town or city street address of well if located within city?
1 N, 1 E of Lewis, Kansas

2 WATER WELL OWNER: J. H. Cross Sterling Drilling Co. Cross 2-17
 RR#, St. Address, Box # : Macksville, Ks. Box 129 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : 67557 Sterling, Ks. 67579 Application Number:

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

4 DEPTH OF COMPLETED WELL: 76 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 30 ft. below land surface measured on mo/day/yr 12/4/91
 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 in. to ft., and in. to ft.
 WELL WATER ~~TYPE~~ USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic was 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only 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 _____

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded
 2 PVC 4 ABS 7 Fiberglass Threaded
 Blank casing diameter 5 in. to ft., Dia in. to ft., Dia in. to ft.
 Casing height above land surface 3 ft. below in., weight lbs./ft. Wall thickness or gauge No.
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
 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: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)
 SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.
 From ft. to ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From ft. to 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 6 ft. to 3 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? South How many feet? 60

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
			<u>76</u>	<u>30</u>	<u>Sand and gravel</u>
			<u>30</u>	<u>6</u>	<u>Clay</u>
			<u>6</u>	<u>3</u>	<u>Bentonite</u>
			<u>3</u>	<u>0</u>	<u>Top soil</u>

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) .. 12/4/91 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) 2/13/92 under the business name of Kelly's Water Well Service by (signature) [Signature]

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.

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