

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <u>Gray</u>		C $\frac{1}{4}$ NW $\frac{1}{4}$ SE $\frac{1}{4}$		9		T 24 S		R 30 E/W	
Distance and direction from nearest town or city street address of well if located within city?									
<u>7 1/4 north 2 1/4 west of Charleston</u>									
2 WATER WELL OWNER:		Albertine Grimsley		Mustang Drilling					
RR#, St. Address, Box # :		Topeka, Ks.		Box 1609		Board of Agriculture, Division of Water Resources			
City, State, ZIP Code :		Great Bend, Ks.		67530		Application Number:		T84-6	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>220</u> ft. ELEVATION: .....							
		Depth(s) Groundwater Encountered 1. <u>64</u> ft. 2. .... ft. 3. .... ft.							
		WELL'S STATIC WATER LEVEL <u>130</u> ft. below land surface measured on mo/day/yr <u>1-11-84</u>							
		Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm							
		Est. Yield <u>NA</u> gpm: Well water was ..... ft. after ..... hours pumping ..... gpm							
		Bore Hole Diameter <u>10</u> in. to <u>220</u> ft., and ..... in. to ..... ft.							
WELL WATER TO BE USED AS:		5 Public water supply      8 Air conditioning      11 Injection well 1 Domestic      3 Feedlot <u>6 Oil field water supply</u> 9 Dewatering      12 Other (Specify below) 2 Irrigation      4 Industrial      7 Lawn and garden only      10 Observation well							
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 <u>HTH</u> No									
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <u>X</u> Clamped .....							
1 Steel      3 RMP (SR)		6 Asbestos-Cement      9 Other (specify below)      Welded .....							
2 PVC      4 ABS		7 Fiberglass      Threaded .....							
Blank casing diameter <u>5</u> in. to <u>180</u> ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.									
Casing height above land surface <u>18</u> in., weight ..... lbs./ft. Wall thickness or gauge No. <u>258</u>									
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 <u>PVC</u> 10 Asbestos-cement							
1 Steel      3 Stainless steel      5 Fiberglass      8 RMP (SR)      11 Other (specify) .....		12 None used (open hole)							
2 Brass      4 Galvanized steel      6 Concrete tile      9 ABS									
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 <u>180</u> ft. to <u>220</u> ft., From ..... ft. to ..... ft.							
GRAVEL PACK INTERVALS:		From <u>10</u> ft. to <u>220</u> ft., From ..... ft. to ..... ft.							
6 GROUT MATERIAL:		1 Neat cement      2 <u>Cement grout</u> 3 Bentonite      4 Other .....							
Grout Intervals: From <u>0</u> ft. to <u>10</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		11 Fuel storage      15 <u>Oil well/Gas well</u>							
2 Sewer lines      5 Cess pool      8 Sewage lagoon      12 Fertilizer storage      16 Other (specify below)									
3 Watertight sewer lines      6 Seepage pit      9 Feedyard      13 Insecticide storage									
Direction from well? <u>west</u>		How many feet? <u>80</u>							
FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHOLOGIC LOG			
0	2	Top soil		203	215	Sand and gravel & clay layers			
2	46	Brown clay		215	220	Clay			
46	59	Sand							
59	64	Hard rock							
64	72	Sand and gravel							
72	73	Hard rock							
73	99	Sand and gravel & clay layers							
99	113	Sandy clay							
113	136	Sand and gravel & clay layers							
136	141	Clay							
141	150	Sand and gravel							
150	151	Hard rock							
151	157	Clay							
157	190	Sand and gravel & clay layers							
190	203	Clay							
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>1-11-84</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>1-18-84</u>									
under the business name of <u>Rosencrantz-Bemis Ent.</u> by (signature) <u>Lora Dodson</u>									
INSTRUCTIONS: Use typewriter or ball point pen, <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.									

OFFICE USE ONLY

T

24

R

30

E/W

SEC.

9

C 1/4

NW 1/4

SE

1/4