

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>Hamilton</u>	<u>NE</u> ¼ <u>NE</u> ¼ <u>SE</u> ¼	<u>4</u>	<u>T 24 S</u>	<u>R 43</u> EW

Distance and direction from nearest town or city? Approx. 1 mile West and 2 1/2 miles South of Coolidge, KS Street address of well if located within city?

2 WATER WELL OWNER: Mary Ellen Olson
 RR#, St. Address, Box # : 807 North Durham Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Ulysses, KS 67880 Application Number: 27,762

3 DEPTH OF COMPLETED WELL: 82 ft. Bore Hole Diameter: 26 in. to _____ ft., and _____ in. to _____ ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 7 Lawn and garden only 10 Observation well
 Well's static water level: 41 ft. below land surface measured on November month 11 day 1980 year
 Pump Test Data: Well water was 63 ft. after 4 hours pumping. 931 gpm
 Est. Yield 1000 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 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 X
 7 Fiberglass Threaded _____
 Blank casing dia 16 in. to 82 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 16 in., weight 42.05 lbs./ft. Wall thickness or gauge No. 250
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 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
 7 Torch cut 10 Other (specify) _____
 Screen-Perforation Dia 16 in. to 79 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 59-79 ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 10 ft. to 82 ft., From _____ ft. to _____ ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grouted Intervals: From 0 ft. to 10 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: None Observed
 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)
 13 Watertight sewer lines
 Direction from well _____ How many feet _____ ? Water Well Disinfected? Yes _____ No X
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, date sample was submitted _____ month _____ day _____ year Pump Installed? Yes X No _____
 If Yes: Pump Manufacturer's name Johnston Model No. 12 EMC HP 40 Volts 460
 Depth of Pump Intake 75 ft. Pumps Capacity rated at _____ gal./min.
 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other _____

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on November month 10 day 1980 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 145
 This Water Well Record was completed on November month 17 day 1980 year under the business name of Henkle Drilling & Supply Co., Inc. by (signature) Bruce J. Reichmuth

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
			<u>See Attached Log</u>			

ELEVATION: _____

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)
 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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY
T
R
43
EW
SEC
4
1/4
1/4
SE
1/4

