

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Reed</u>		<u>SE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	<u>7</u>	T <u>24</u> S	R <u>7</u> E/W
Distance and direction from nearest town or city street address of well if located within city?					
2 WATER WELL OWNER: <u>John Yoder</u>					
RR#, St. Address, Box #: <u>13908 W. Mills</u>					
City, State, ZIP Code: <u>Partridge, KS</u>					
Board of Agriculture, Division of Water Resources Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>60'</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>28'</u> ft. 2. <u>60'</u> ft. 3. <u>60'</u> ft.			
		WELL'S STATIC WATER LEVEL <u>28'</u> ft. below land surface measured on mo/day/yr			
		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 TO BE USED AS:		5 Public water supply    8 Air conditioning    11 Injection well 1 Domestic    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 <u>5</u>		If yes, mo/day/yr sample was submitted _____			
Water Well Disinfected? Yes <u>5</u> No					
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
2 PVC		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
Blank casing diameter <u>6</u> in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.				8 Concrete tile	
Casing height above land surface <u>36'</u> in., weight _____ lbs./ft. Wall thickness or gauge No. _____				9 Other (specify below)	
TYPE OF SCREEN OR PERFORATION MATERIAL:				CASING JOINTS: Glued _____ Clamped _____	
1 Steel		3 Stainless steel		Welded _____	
2 Brass		4 Galvanized steel		Threaded <u>X</u>	
3 Mill slot		5 Fiberglass		10 Asbestos-cement	
4 Key punched		6 Concrete tile		11 Other (specify) <u>NA</u>	
SCREEN OR PERFORATION OPENINGS ARE:				12 None used (open hole)	
1 Continuous slot		5 Gauzed wrapped		8 Saw cut	
2 Louvered shutter		6 Wire wrapped		9 Drilled holes	
3 Mill slot		7 Torch cut		10 Other (specify) <u>NA</u>	
4 Key punched				11 None (open hole)	
SCREEN-PERFORATED INTERVALS:		From <u>NA</u> ft. to <u>NA</u> 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 <u>6</u> ft. to <u>3</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	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below)	
				<u>NONE</u>	
Direction from well?				How many feet?	
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Soil Backfill			
3	6	Bentonite			
6	60	Chlorinated Sand			
Plugged.					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) <u>plugged under my jurisdiction</u> and was completed on (mo/day/year) <u>3-17-92</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) _____ under the business name of _____ by (signature) <u>Dean Dellenbach</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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					