

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Reno</u>		<u>NW 1/4 NW 1/4 NE 1/4</u>	<u>22</u>	T <u>24</u> S	R <u>7</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1 mi S, 1/2 E of Partridge</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # :		Application Number:			
City, State, ZIP Code :		<u>Partridge, KS 67566</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>50</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.			
		WELL'S STATIC WATER LEVEL <u>26</u> ft. below land surface measured on mo/day/yr <u>12-5-85</u>			
		Pump test data: Well water was <u>28</u> ft. after <u>1</u> hours pumping <u>30</u> gpm			
		Est. Yield <u>100</u> gpm: Well water was .... ft. after .... hours pumping .... gpm			
		Bore Hole Diameter <u>9</u> in. to <u>54</u> ft., and .... in. to .... ft.			
WELL WATER TO BE USED AS:		5 Public water supply <input checked="" type="checkbox"/> 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 Observation well			
Was a chemical/bacteriological sample submitted to Department? Yes.....No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted		Water Well Disinfected? Yes <input checked="" type="checkbox"/> No			
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR)		5 Wrought iron 8 Concrete tile		CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped	
<input checked="" type="checkbox"/> PVC 4 ABS		6 Asbestos-Cement 9 Other (specify below)		Welded	
Blank casing diameter <u>6</u> in. to <u>40</u> ft. Dia		7 Fiberglass		Threaded	
Casing height above land surface <u>12</u> in., weight <u>3.35</u> lbs./ft. Wall thickness or gauge No. <u>16.0</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass		<input checked="" type="checkbox"/> PVC 8 RMP (SR)		10 Asbestos-cement	
2 Brass 4 Galvanized steel 6 Concrete tile		9 ABS		11 Other (specify) .....	
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped		<input checked="" type="checkbox"/> 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>40</u> ft. to <u>50</u> ft., From .... ft. to .... ft.					
GRAVEL PACK INTERVALS: From <u>35</u> ft. to <u>54</u> ft., From .... ft. to .... ft.					
6 GROUT MATERIAL: <input checked="" type="checkbox"/> Neat cement 2 Cement grout 3 Bentonite 4 Other .....					
Grout Intervals: From <u>3</u> ft. to <u>13</u> ft., From .... ft. to .... ft., From .... ft. to .... ft.					
What is the nearest source of possible contamination:					
<input checked="" type="checkbox"/> Septic tank 4 Lateral lines 7 Pit privy		10 Livestock pens 14 Abandoned water well		15 Oil well/Gas well	
2 Sewer lines 5 Cess pool 8 Sewage lagoon		11 Fuel storage 12 Fertilizer storage		16 Other (specify below)	
3 Watertight sewer lines 6 Seepage pit 9 Feedyard		13 Insecticide storage			
Direction from well? <u>S</u>		How many feet? <u>60</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
<u>0</u>	<u>9</u>	<u>Br clay</u>			
<u>9</u>	<u>33</u>	<u>Sand &amp; Sm Gravel</u>			
<u>33</u>	<u>38</u>	<u>Sand Stone</u>			
<u>38</u>	<u>40</u>	<u>Sand</u>			
<u>40</u>	<u>42</u>	<u>Rock-wh. Ye</u>			
<u>42</u>	<u>50</u>	<u>Sand</u>			
<u>50</u>	<u>54</u>	<u>Gr Clay</u>			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>12-5-85</u> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <u>447</u> This Water Well Record was completed on (mo/day/yr) <u>6-15-86</u>					
under the business name of <u>Miller Drilling</u> by (signature) <u>Eva M. Miller</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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					