

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Stafford</u>	<u>nw</u> $\frac{1}{4}$ <u>nw</u> $\frac{1}{4}$ <u>nw</u> $\frac{1}{4}$	<u>22</u>	<u>T</u> <u>25</u> <u>S</u>	<u>R</u> <u>11</u> <u>x5</u> <u>W</u>
Distance and direction from nearest town or city street address of well if located within city?				

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~~1/2 west of Neola, Ks.~~

2	WATER WELL OWNER:	Roger Clough	
	RR#, St. Address, Box # :	214 North Park	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code :	Stafford, ks. 67578	Application Number:

3	LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF COMPLETED WELL.....60.....ft. ELEVATION:
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL..... 60..... ft. ELEVATION:

WELL'S STATIC WATER LEVEL 1.8 ft. below land surface measured on mo/day/yr 6-1.7-8.7

1 Mile

Pump test data: Well water was ft. after hours pumping gpm

Est. Yield .. NA .. gpm: Well water was ft. after hours pumping gpm

Bore Hole Diameter. . . . 10 . . . in. to 60 . . . ft., and in. to ft.

WELL WATER TO BE USED AS:

5 Public water supply	8 Air conditioning	11 Injection well
<u>1</u> Domestic	3 Feedlot	6 Oil field water supply
2 Irrigation	4 Industrial	7 Lawn and garden only
		10 Observation well
		12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes.....No.....x.....; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes h+h No

5	TYPE OF BLANK CASING USED:		5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued ☒ . . . Clamped Welded Threaded
	1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	
	2 PVC	4 ABS	7 Fiberglass		

Blank casing diameter 5 in. to 40 ft. Dia in. to ft. Dia in. to ft.
Casing height above land surface . . . 18 in., weight lbs./ft. Wall thickness or gauge No. . . . 258

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	7 PVC	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	8 RMP (SR)	11 Other (specify)
			9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped	8 <u>Saw cut</u>	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 40 ft. to 60 ft., From ft. to ft.
From ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From 20 ft. to 60 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	0	ft. to	20	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)
Direction from well? _____			13 Insecticide storage	
How many feet? _____				

Direction from well?		west		How many feet?		400	
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG		

[illegible]

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) 6-17-87 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo/day/yr) 6-30-87 under the business name of Rosencrantz-Bemis by (signature) Fredia Delton

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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.