

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <u>Stafford</u>		NE ¼ SE ¼ SE ¼		24		T 25 S		R 12 E/W	
Distance and direction from nearest town or city street address of well if located within city? <u>Approximately 4 miles west and 1 mile south of Neola</u>									
2 WATER WELL OWNER:		<u>Wayne Dickson</u>							
RR#, St. Address, Box # :		<u>Route 1 - Box 127</u>				Board of Agriculture, Division of Water Resources			
City, State, ZIP Code :		<u>Stafford, KS 67578</u>				Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>60</u> ft. ELEVATION: <u>unknown</u> ft.							
1 Mile		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.							
		WELL'S STATIC WATER LEVEL ... <u>41'</u> ft. below land surface measured on mo/day/yr							
		Pump test data: Well water was <u>not ch'd</u> ft. after hours pumping gpm							
		Est. Yield <u>unknown</u> gpm: Well water was ft. after hours pumping gpm							
		Bore Hole Diameter .. <u>8</u> in. to .. <u>60</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 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>X</u>; If yes, mo/day/yr sample was submitted									
Water Well Disinfected? Yes <u>X</u> No									
5 TYPE OF BLANK CASING USED:		5 Wrought iron		8 Concrete tile		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>41</u> ft., Dia in. to ft., Dia in. to ft.									
Casing height above land surface <u>24</u> in., weight <u>2.36</u> lbs./ft. Wall thickness or gauge No. <u>214</u>									
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC		10 Asbestos-cement					
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)									
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)									
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>41</u> ft. to <u>58</u> ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>60</u> ft., From ft. to ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <u>Bentonite Holeplug</u>									
Grout Intervals: From ft. to ft., From ft. to ft., From <u>0</u> ft. to <u>20</u> 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)							
		13 Insecticide storage <u>None known</u>							
Direction from well? How many feet?									
FROM		TO		LITHOLOGIC LOG		FROM		TO	
0		3		Topsoil					
3		8		Sand, very fine, fine, loose, silty					
8		29		Clay, gray, and tan, soft, sandy					
29		36		Sand and gravel, fine, medium, loose, clean					
36		41		Clay, gray and tan					
41		58		Sand and gravel, fine, medium, some coarse, loose, clean					
58		60		Clay, orange, soft, sandy					
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>7-6-92</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>185</u> This Water Well Record was completed on (mo/day/yr) <u>7-23-92</u> under the business name of <u>Clarke Well & Equipment, Inc.</u> by (signature) <u>[Signature]</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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									