

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: Stafford	NE 1/4 SE 1/4 SE 1/4	31	T 25 S	R 13 E (W)

Distance and direction from nearest town or city? _____ Street address of well if located within city? _____

2 WATER WELL OWNER: **Kansas Geological Survey/Groundwater Management District #5**
 RR#, St. Address, Box # : _____ Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **St. John, Kansas 67576** Application Number: _____

3 DEPTH OF COMPLETED WELL: **226** ft. Bore Hole Diameter: **5** in. to **226** 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 **Research**

Well's static water level: **65.7** ft. below land surface measured on **Jan.** month **5** day **83** year
 Pump Test Data: _____ Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ 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 _____
 7 Fiberglass Threaded _____

Blank casing dia: **5** in. to **221** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: **24** in., weight _____ lbs./ft. Wall thickness or gauge No: **1/4"**

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____
 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: **5** in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From **221** ft. to **226** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From **220** ft. to **226** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grouted Intervals: From **220** ft. to **110** ft., From **20** ft. to **0** ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:
 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**
 Was a chemical/bacteriological sample submitted to Department? Yes **No** If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes **No**
 If Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____
 Depth of Pump Intake _____ 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 **June** month **17** day **81** year _____
 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 **1** month **27** day **83** year under the business name of _____ by (signature) **Patrick M Cobb**

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	6	Topsoil	01		
	6	22	silt/fine sand	05		
	22	37	fine to coarse sand clay	01		
	37	66	fine to coarse sand	05		
	66	97	tr clay, med-coarse sand	09		
	97	153	very coarse sand/gravel	17		
	153	160	reddish clay	01		
	160	206	gravel	11		
	206	226	red rock shale	19		
ELEVATION: 1973.1	detailed log available from KGS					

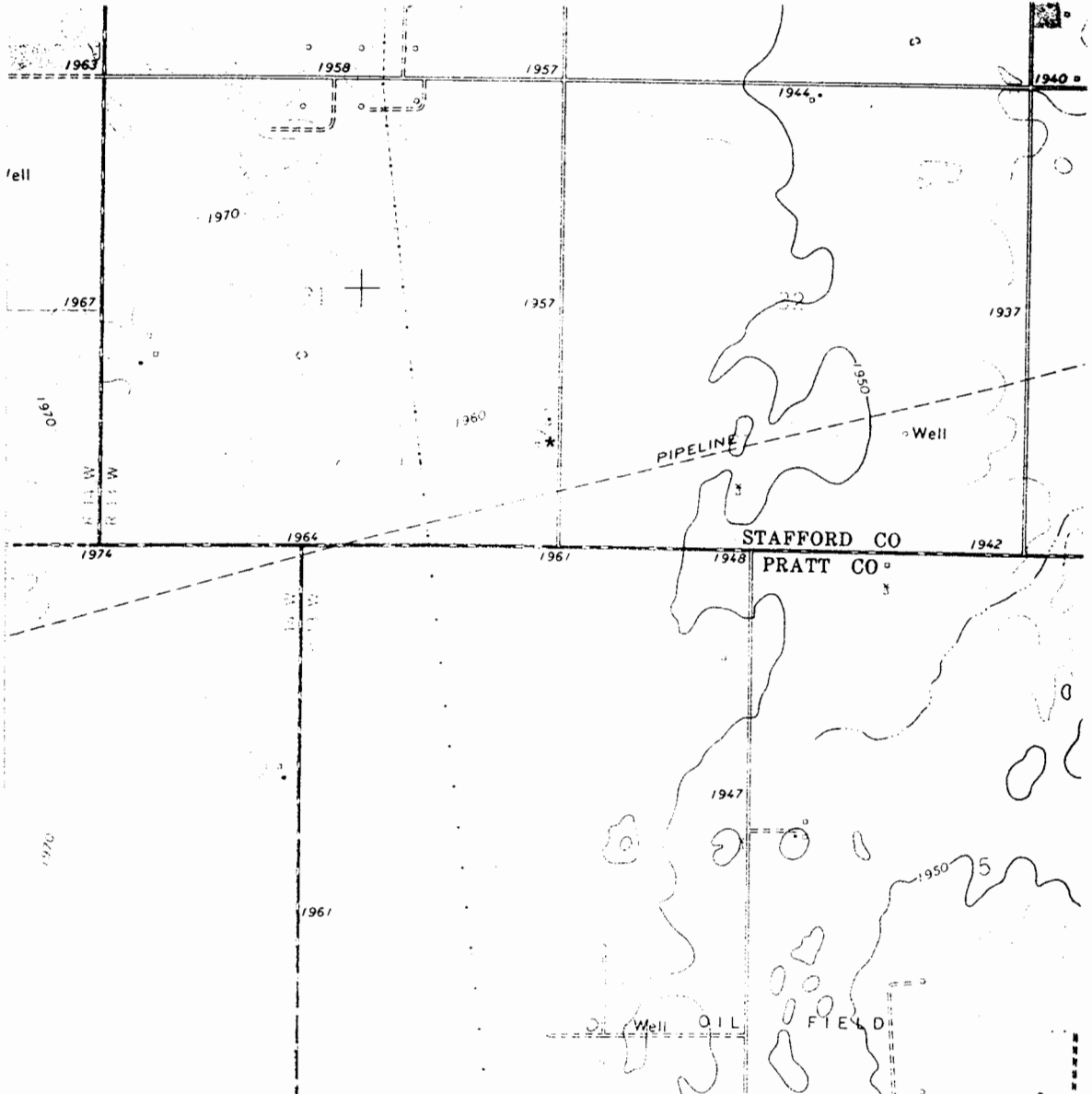
Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)

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
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SEC
1/3
31
1/4
SE 1/4
SE 1/4

SITE NUMBER : 20
SITE LOCATION : NE SE SE
LEGAL LOCATION: SEC31 T25S R13W
COUNTY : STAFFORD

LANDOWNER: HOMER SHOOP
ADDRESS : RURAL ROUTE 1
ST. HOHN, KANSAS 67576
PHONE NO.: 316-549-6242



WELL LOCATION *