

1 LOCATION OF WATER WELL		Fraction		Section Number		Township Number		Range Number	
County: <u>Stafford</u>		<u>SE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$		<u>2</u>		<u>T</u> <u>25</u> <u>S</u>		<u>R</u> <u>14</u> <u>W</u> <u>E/W</u>	
Distance and direction from nearest town or city? <u>2 E, 5 S of Dillwyn, Kansas</u>					Street address of well if located within city?				
2 WATER WELL OWNER: <u>Big Springs Drilling</u>					Board of Agriculture, Division of Water Resources				
RR#, St. Address, Box #: <u>Box 8287, Minger Station</u>					Application Number: <u>Unknown</u>				
City, State, ZIP Code: <u>Wichita, Kansas 67208</u>									
3 DEPTH OF COMPLETED WELL: <u>65</u> ft. Bore Hole Diameter: <u>8</u> in. to <u>65</u> ft., and _____ in. to _____ ft.									
Well Water to be used as:					11 Injection well				
1 Domestic 3 Feedlot 6 <u>Oil field water supply</u> 8 Air conditioning 9 Dewatering 12 Other (Specify below)									
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well									
Well's static water level: <u>19</u> ft. below land surface measured on <u>2</u> month <u>24</u> day <u>1981</u> year									
Pump Test Data					hours pumping				
Est. Yield <u>60</u> gpm: Well water was _____ ft. after _____ hours pumping					gpm				
4 TYPE OF BLANK CASING USED:					Casing Joints: <u>Glued</u> _____ Clamped _____				
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile					Welded _____				
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below)					Threaded _____				
3 Fiberglass									
Blank casing dia: <u>5</u> in. to <u>45</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					Sch. <u>40</u>				
Casing height above land surface: <u>12</u> in., weight <u>2.8</u> lbs./ft. Wall thickness or gauge No. _____									
TYPE OF SCREEN OR PERFORATION MATERIAL:					7 PVC 10 Asbestos-cement				
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____					12 None used (open hole)				
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS									
Screen or Perforation Openings Are:					8 Saw cut 11 None (open hole)				
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 6 Wire wrapped 9 Drilled holes					10 Other (specify) _____				
2 Louvered shutter 4 Key punched 7 Torch cut									
Screen-Perforation Dia: <u>5</u> in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Screen-Perforated Intervals: From <u>45</u> ft. to <u>65</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.									
Gravel Pack Intervals: From <u>10</u> ft. to <u>65</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.									
5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other _____									
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.									
What is the nearest source of possible contamination:					10 Fuel storage 14 Abandoned water well				
1 Septic tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 15 <u>Oil well/Gas well</u>					16 Other (specify below)				
2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage									
3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines									
Direction from well: <u>East</u> How many feet: <u>60</u> ? Water Well Disinfected? Yes _____ No _____									
Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____ If yes, date sample 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) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month <u>24</u> day <u>1981</u> year									
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>186</u>									
This Water Well Record was completed on _____ month <u>16</u> day <u>1981</u> year under the business name of <u>Kellys Water Well Service</u> by (signature) <u>Kelly Price</u>									
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM TO		LITHOLOGIC LOG		FROM TO		LITHOLOGIC LOG	
		0 25		Clay					
		25 65		Sand and Gravel					
ELEVATION: <u>unknown</u>									
Depth(s) Groundwater Encountered 1. <u>19</u> 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.									