

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: Stafford	C 1/4 N 1/2 1/4 NE 1/4	27	T 25 S	R 11W E/W

Distance and direction from nearest town or city?

10 South, $5\frac{1}{4}$ West of St. John KS

Street address of well if located within city?

2	WATER WELL OWNER:	Big Springs Drilling	
	RR#, St. Address, Box # :	Box 8287, Munger Station	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code :	Wichita, Kansas 67208	Application Number: Unknown

3 DEPTH OF COMPLETED WELL 92 ft. Bore Hole Diameter 8 in. to 92 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 <u>Oil field water supply</u>	9 Dewatering	12 Other (Specify below)
		7 Lawn and garden only	10 Observation well	

Well's static water level 24 ft. below land surface measured on January month 9 day 1980 year

Pump Test Data : Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield 60 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

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

Blank casing dia. 5 in. to 72 ft., Dia. in. to ft., Dia. in. to ft.
Casing height above land surface 12 in., weight 2.8 lbs./ft. Wall thickness or gauge No. Sch. 40

TYPE OF SCREEN OR PERFORATION MATERIAL:					7. <u>PVC</u>	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 <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-Perforation Dia. 5 in. to _____ ft. Dia. _____ in. to _____ ft. Dia. _____ in. to _____ ft.

Screen-Perforated Intervals: From 72 ft. to 92 ft., From . ft. to . ft.
From . ft. to . ft., From . ft. to . ft.

Gravel Pack Intervals: From 10 ft. to 92 ft., From _____ ft. to _____ 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	0	ft to 10	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>		
2 Sewer lines	5 Seepage pit	8 Feed yard	12 Insecticide storage	16 Other (specify below)		
3 Lateral lines	6 Pit privy	9 Livestock pens	13 Watertight sewer lines			

Direction from well Southwest How many feet 70 ? 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 January month, 9 day, 1980 year.

completed on _____ day _____ month _____ year _____
and this record is true to the best of my knowledge and belief Kansas Water Well Contractor's License No. 186

This Water Well Record was completed on February month, 15 day, 1980 year under the business name of Kelly's Water Well Service bv (signature) Kelly Price

7	LOCATE WELL'S LOCATION	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
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7	LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	0	45	Clay		
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45	50	Sand and Gravel			
50	70	Gravel			

50	70	Clay			
70	92	Sand and Gravel			

[illegible][illegible][illegible][illegible]

1 ← 1 Mile → 1

ELEVATION: Unknown						
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Depth(s) Groundwater Encountered 1. 24 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.