

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Gray</u>	<u>SW 1/4 SW 1/4 NE 1/4</u>	<u>26</u>	T <u>25</u> S	R <u>27</u> E <u>00</u>

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

From Cimarron, 2 miles north on Hwy. 23 then 1/2 west.

2 WATER WELL OWNER: <u>Diane Warner</u>	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #: <u>P.O. Box 309</u>	Application Number:
City, State, ZIP Code: <u>Cimarron, KS 67835</u>	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>153'</u> ft. ELEVATION:
	Depth(s) Groundwater Encountered <u>1</u> ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL <u>999</u> ft. below land surface measured on mo/day/yr Pump test data: Well water was ft. after hours pumping gpm Est. Yield gpm: Well water was ft. after hours pumping gpm Bore Hole Diameter in. to ft. and in. to ft. WELL WATER TO BE USED AS: 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 Clamped
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
2 PVC	4 ABS	7 Fiberglass	11 Injection well
Blank casing diameter <u>5"</u> in. to ft. Dia. in. to ft. Dia. in. to ft.			12 Other (Specify below)
Casing height above land surface in. weight 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)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
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) <u>NA</u>
SCREEN-PERFORATED INTERVALS: From <u>NA</u> ft. to <u>NA</u> ft. From ft. to ft. From ft. to ft. From ft. to ft.			
GRAVEL PACK INTERVALS: From ft. to 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 <u>3'</u> ft. to <u>6'</u> ft. From ft. to ft. From ft. to ft. From ft. to ft.				
What is the nearest source of possible contamination:	10 Livestock pens	14 Abandoned water well		
1 Septic tank	4 Lateral lines	7 Pit privy	11 Fuel storage	15 Oil well/Gas well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	16 Other (specify below)
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage	<u>NONE</u>
Direction from well?			How many feet?	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
			<u>153'</u>	<u>150'</u>	<u>chlorinated sand</u>
			<u>150'</u>	<u>6'</u>	<u>compacted silt and clay</u>
			<u>6'</u>	<u>3'</u>	<u>bentonite chips</u>
					<u>Cement cap</u>

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>9-21-92</u> and this record is true to the best of my knowledge and belief. Kansas Water Contractor's License No. <u>533</u> This Water Well Record was completed on (mo/day/yr) <u>4-19-93</u> under the business name of <u>Jantzen Water Well Repair</u> by (signature) <u>[Signature]</u>
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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.

OFFICE USE ONLY

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