

1 LOCATION OF WATER WELL: County: <b>Kearny</b>		Fraction <b>NW 1/4 NW 1/4 NW 1/4</b>		Section Number <b>16</b>		Township Number <b>T 25 R 36 E/W</b>		Range Number <b>R 36 E/W</b>	
Distance and direction from nearest town or city street address of well if located within city? <b>From Lakin go 2mi South lmi West lmi South lmi West and South into location.</b>									
2 WATER WELL OWNER: <b>George Tate McConaphy Production</b>									
RR#, St. Address, Box # : City, State, ZIP Code : <b>Lakin, Kansas</b>						Board of Agriculture, Division of Water Resources Application Number: <b>T 83-569</b>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <b>240</b> ft. ELEVATION: .....							
<div style="border: 1px solid black; padding: 5px; text-align: center;">N W      E SW      SE S</div>		Depth(s) Groundwater Encountered 1. <b>200</b> ft. 2. .... ft. 3. .... ft.							
		WELL'S STATIC WATER LEVEL <b>40</b> ft. below land surface measured on mo/day/yr <b>11/8/83</b>							
		Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm							
		Est. Yield <b>60</b> gpm: Well water was ..... ft. after ..... hours pumping ..... gpm							
Bore Hole Diameter: <b>9</b> in. to <b>240</b> 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 Observation well			
Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted									
Water Well Disinfected? Yes.....No.....									
5 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 diameter <b>5</b> in. to <b>160</b> ft., Dia. .... in. to .... ft., Dia. .... in. to .... ft.									
Casing height above land surface <b>28</b> in., weight <b>2.78</b> lbs./ft. Wall thickness or gauge No. <b>256</b>									
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-PERFORATED INTERVALS: From <b>160</b> ft. to <b>240</b> ft., From ..... ft. to ..... ft.									
GRAVEL PACK INTERVALS: From <b>60</b> ft. to <b>240</b> ft., From ..... ft. to ..... ft.									
6 GROUT MATERIAL:									
1 Neat cement		2 Cement grout		3 Bentonite		4 Other .....			
Grout Intervals: From <b>0</b> ft. to <b>10</b> ft., From ..... ft. to ..... ft., From ..... ft. to ..... 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			
Direction from well? <b>Northeast of water well.</b> How many feet? <b>100'</b>									
FROM		TO		LITHOLOGIC LOG		FROM		TO	
0		4 01		surface					
4		8 07		fine sand					
8		56 14		gravel					
56		63 04		sandy clay					
63		165 01		blue clay					
165		205 08		medium to large sand					
205		230 14		gravel					
230		240 19		shale					
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) <b>November 8, 1983</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>118</b> This Water Well Record was completed on (mo/day/yr) <b>November 10, 1983</b> under the business name of <b>Carlile Water Well Service, Inc.</b> by (signature) <i>Edward E. Means</i>									
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, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.									