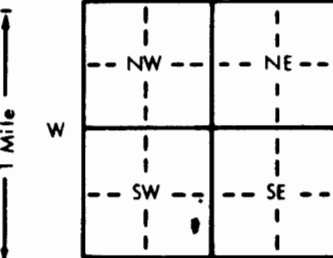


1] LOCATION OF WATER WELL: County: PRATT		Fraction: R1/2 1/4 S 1/4 SW 1/4		Section Number: 22		Township Number: T 26 S		Range Number: R 13 E		
Distance and direction from nearest town or city street address of well if located within city? 1/4 MI 2N 1/2 E NORTHSIDE										
2] WATER WELL OWNER: L.D. DRILLING INC. RR#, St. Address, Box #: RT1, BOX 183B City, State, ZIP Code: GREAT BEND, KS 67530										
Board of Agriculture, Division of Water Resources Application Number: 785-992										
3] LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4] DEPTH OF COMPLETED WELL: 95 ft. ELEVATION: 62 ft.							
			Depth(s) Groundwater Encountered 1. 62 ft. 2. _____ ft. 3. _____ ft.							
			WELL'S STATIC WATER LEVEL 48' ft. below land surface measured on mo/day/yr 11-13-85							
			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: 7.78 in. to 95 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 _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.										
Casing height above land surface 12 in., weight 2.65 lbs./ft. Wall thickness or gauge No. 214										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement										
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____										
9 ABS 12 None used (open hole)										
SCREEN OR PERFORATION OPENINGS ARE: 1/8										
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 75 ft. to 95 ft. From _____ ft. to _____ ft.										
From _____ ft. to _____ ft. From _____ ft. to _____ ft.										
GRAVEL PACK INTERVALS: From 65 ft. to 95 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 0 ft. to 10 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.										
What is the nearest source of possible contamination: NONE										
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? _____ How many feet? _____										
FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG										
0 1 TOP SOIL										
1 10 BROWN CLAY & FINE SAND MLX.										
10 26 GREY & BROWN CLAY										
26 31 GREY & YELLOW SANDY CLAY										
31 58 BROWN CLAY										
58 95 SAND & GRAVEL.										
7] 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 (mo/day/year) 11-13-85 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 389 This Water Well Record was completed on (mo/day/yr) 11-21-85 under the business name of REISER WATER WELL SERV. INC. by (signature) <i>Rudolph Reiser</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.										