

1 LOCATION OF WATER WELL: County: <b>Pratt</b>	Fraction <b>SW 1/4 NE 1/4 SW 1/4</b>	Section Number <b>33</b>	Township Number <b>T 26 S</b>	Range Number <b>R 13W E/W</b>
---	---	-----------------------------	----------------------------------	----------------------------------

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

$\frac{1}{2}$  W,  $\frac{1}{2}$  N of Iuka, Kansas

2 WATER WELL OWNER: <b>George Lemmon</b> RR#, St. Address, Box #: <b>Route 2</b> City, State, ZIP Code: <b>Pratt, Ks. 67124</b>	<b>Graves Drilling</b> <b>910 Union Center</b> <b>Wichita, Kansas 67202</b>	<b>Lemmon #5</b> Board of Agriculture, Division of Water Resources Application Number: <b>T85-929</b>
---	---	---

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <b>110</b> ft. ELEVATION:
--	--

N

NW	NE
SW	SE

S

X

Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.

WELL'S STATIC WATER LEVEL ..... **55** ft. below land surface measured on mo/day/yr ..... **11/8/85**

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 ..... in. to ..... ft., and ..... in. to ..... ft.

WELL WATER ~~TO BE~~ USED AS:

5 Public water supply	8 Air conditioning	11 Injection well
1 Domestic <b>WAS</b>	3 Feedlot	6 <u>Oil field water supply</u>
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:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued ..... Clamped .....
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
2 <u>PVC</u>	4 ABS	7 Fiberglass	Welded .....
Blank casing diameter ..... <b>5</b> in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.			Threaded .....
Casing height above land surface. <b>3 ft. below</b> 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
11 Other (specify) .....			12 None used (open hole)
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) .....
SCREEN-PERFORATED INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft.			
GRAVEL PACK INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft.			

6 GROUT MATERIAL:	1 <u>Neat cement</u>	2 Cement grout	3 Bentonite	4 Other .....
Grout Intervals: From ..... <b>6</b> ft. to <b>3</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
	2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage
	3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage
				13 Insecticide storage
Direction from well? <b>South</b>				14 Abandoned water well
				15 <u>Oil well/Gas well</u>
				16 Other (specify below)
				How many feet? <b>60</b>

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
110	55	Sand			
55	6	Clay			
6	3	Cement			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) <u>plugged</u> under my jurisdiction and was completed on (mo/day/year) .. <b>11/8/85</b> ..... and this record is true to the best of my knowledge and belief, Kansas Water Well Contractor's License No. .... <b>186</b> ..... This Water Well Record was completed on (mo/day/yr) ..... <b>11/30/85</b> ..... under the business name of <b>Kelly's Water Well Service</b> by (signature) <i>George Lemmon</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.

OFFICE USE ONLY T R E/W SEC. 1/4 1/4 1/4