

1 LOCATION OF WATER WELL: County: <u>Pratt</u>		Fraction <u>NW 1/4 NW 1/4 NE 1/4</u>		Section Number <u>21</u>	Township Number <u>T 26 S</u>	Range Number <u>R 14 E</u> (W)												
Distance and direction from nearest town or city street address of well if located within city? <u>Approximately 1/2 mile south and 1/2 mile east of Byers</u>				Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: <u>37.775892</u> Longitude: <u>-98.856868</u> Elevation: <u>Unknown</u> Datum: <u>NAD83</u> Data Collection Method: <u>WAAS GPS Unit</u>														
2 WATER WELL OWNER: <u>Barbara Weir</u> RR#, St. Address, Box # : <u>c/o Steve Maechten</u> City, State, ZIP Code : <u>70036 NW 30th</u> <u>Pratt, KS 67124</u>																		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="margin: 10px auto; width: 100px; text-align: center;"><tr><td></td><td>X</td><td></td></tr><tr><td>--NW--</td><td></td><td>--NE--</td></tr><tr><td></td><td></td><td></td></tr><tr><td>--SW--</td><td></td><td>--SE--</td></tr></table> S			X		--NW--		--NE--				--SW--		--SE--	4 DEPTH OF COMPLETED WELL <u>150</u> ft. Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL <u>24</u> ft. below land surface measured on mo/day/yr <u>02-05-09</u> Pump test data: Well water was <u>Not checked</u> ft. after _____ hours pumping _____ gpm Est. Yield <u>Unknown</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) (2) Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr _____ Sample was submitted _____ Water well disinfected? Yes <input checked="" type="checkbox"/> No _____				
	X																	
--NW--		--NE--																
--SW--		--SE--																
5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) (2) PVC 4 ABS 7 Fiberglass Blank casing diameter <u>16</u> in. to <u>104</u> ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft. Casing height above land surface <u>12</u> in., weight <u>19.75</u> lbs./ft. Wall thickness or gauge No. <u>.616</u>		CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____ Welded _____ Threaded _____																
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel (3) Stainless Steel 5 Fiberglass (7) PVC 9 ABS 11 Other (Specify) _____ 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)																		
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot (3) Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched (6) Wire wrapped 8 Saw Cut 10 Other (Specify) _____																		
SCREEN-PERFORATED INTERVALS: From <u>104</u> ft. to <u>144</u> ft., From _____ ft. to _____ ft. From <u>144</u> ft. to <u>149</u> ft., From _____ ft. to _____ ft.																		
GRAVEL PACK INTERVALS: From <u>22</u> ft. to <u>55</u> ft., From <u>55</u> ft. to <u>115</u> ft. From <u>115</u> ft. to <u>149</u> ft., From _____ ft. to _____ ft.																		
6 GROUT MATERIAL: 1 Neat Cement 2 Cement grout (3) Bentonite 4 Other _____ Grout Intervals: From _____ ft. to _____ ft., From <u>2</u> ft. to <u>22</u> 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 13 Insecticide Storage (16) Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well <u>None known</u> Direction from well? _____ How many feet? _____																		
FROM		TO		LITHOLOGIC LOG			FROM		TO		PLUGGING INTERVALS							
0		5		Topsoil			44		47		Sandy, clay, tan, soft							
5		12		Clay, brown, sandy, soft			47		51		Clay, tan, white, hard							
12		17		Clay, brown, white, hard			51		71		Gravel, medium, loose							
17		20		Sandy clay, brown, white, soft			71		99		Clay, tan, white, hard							
20		26		Clay, gray, white, hard			99		105		Sandy clay, tan, hard							
26		30		Sandy, clay, brown, soft			105		119		Gravel, fine, medium, loose							
30		32		Gravel, fine, sand, with clay streaks, medium, loose			119		123		Clay, brown, hard							
							123		127		Clay, gray, hard							
32		40		Gravel, medium, loose, clean			127		132		Sandy clay, tan, white							
40		43		Clay, gray, white, hard			132		137		Clay, reddish, hard							
43		44		Sand and gravel, fine, medium, loose			137		149		Gravel, fine, clay streaks at 143'							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> (2) reconstructed (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>02-05-09</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>185</u> This Water Well Record was completed on (mo/day/year) <u>02-12-09</u> Under the business name of <u>Clarke Well & Equipment, Inc.</u> by (signature) <u>[Signature]</u>																		
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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.																		