	WELL R					Division of Water]					
		☐ Chang		se		ources App. N			- Well						
		ATER WE	ևև:	Fraction	En al hi		ction Numbe	er	Township Num			ge Number			
County: PRATT 1/4 SE 1/4 NW 1/4 S 2 WELL OWNER: Last Name: STRATFORD First: Ruth S Puringer							SE 1/4 20 T 26 S R 15 Street or Rural Address where well is located (if unknown, distant								
2 WELL	OWNER: L	ast Name: 57	CATFORE	First: R	with										
					direction from	nearest town or	r inters	section): If at own	er's addr	ess, c	heck here:				
Address: 90386 NW 803 ST Address:															
City:	Byers		State: KS												
3 LOCATI					WELL:	79	· · ·								
WITH "	X" IN														
SECTION BOX: Depth(s) Groundwater Encountered: 1)															
N	WELL'S STATIC WATER LEVEL:														
			below land surface, measured on (mo-day-yr										`		
NW	NIG	above	land surface	on (mo-day-y	r) 11-12		(WAAS enabled? \(\subseteq \text{Yes} \subseteq \text{No} \)								
1	1/17	Pump test	data: Well w	ft	☐ Land Survey ☐ Topographic Map					0)					
w 	E														
SW	%			ft			~~~~~					_			
SW				gpm	m 6 Elevation :ft. ☐ Ground Leve				Laval [] TO	C					
		Estimated	Yield:	79	0 1										
	S silo	Bore Hole	Diameter: 🏖	to	. It. and	t. and					. • .	•			
1 mile Other															
				tor Cample	wall ID		10 🗖 0	it Eigl	d Water Supply	lanca					
1. Domestic: 5. ☐ Public Water Supply: well ID. ☐ Household 6. ☐ Dewatering: how many wells?								Oil Field Water Supply: leaseest Hole: well ID							
_									☐ Uncased ☐						
1 4	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID								il: how many bor						
2. Irrigation 9. Environmental Remediation: well ID.									Loop 🔲 Horizoi						
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex									oop 🔲 Surface L						
4. Industrial Recovery Injection 13. Other (specify):															
Was a chei	mical/bacte	riological sa	mple subn	itted to K	DHE?	res Z No	If yes, date	e sam	ple was submitt	ed:					
		' □ Yes 🏗			_	<i>,</i> —-	J . ,		1						
				C 🗌 Other		CAS	ING JOINTS	S: \M	Glued Clampe	ed 🗌 W	/eldec	l Threaded	<u> </u>		
Casing diam	eter 5	in. to	5.9 ft.,	Diameter		in. to	ft., Dian	neter .	in. to		ft.	_			
		surface		ı. Weigł	ıt /. ((.)	lbs./ft.	Wall thicl	kness	or gauge No						
TYPE OF S	SCREEN OF	R PERFORA													
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)															
☐ Brass	_	vanized Steel	☐ Conc		☐ None us	sed (open ho	le)								
		ATION OP			4	. ~ -		_	0.1 (0.10)						
	nuous Slot	Mill Slot		auze Wrapp					Other (Specify)						
		☐ Key Pun					None (Open F		er Eugen		ft to	Ω			
SCREEN-P	PERFURAT.	ED INTERV	ALS: From	n . ind . f	π., From	. ft., From ft. to ft., From ft. to ft ft.									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other															
		le contamina		It., F10III	• • • • • • • • • • • • • • • • • • • •		16., 1 10111		16. 10	1					
Septic			Lateral Line	es [Pit Privy	Г] Livestock Pe	ens	☐ Insect	ticide Sto	orage				
Sewer Lines Cess Pool Sewage Lag															
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard							Fertilizer St								
☐ Other (Specify)	000					009								
Direction fro	om well?			Dista	ance from we		<u> </u>								
10 FROM	TO		LITHOLO		·	FROM	ТО	LITI	HO. LOG (cont.)	or PLUC	GIN	<u>G INTERVAL</u>	<u>_S</u>		
0	5	_Surf	met.	Sym c	<i></i>										
5	20	5-72-1	ky Clo	rj											
20	35	g,	/ 11	·											
35	45	Smno	ly TAR	· Clay											
45	79	MEd	"UVA 5	must											
ļ						1									
Notes:															
14 603=	D			a amm	mra i mra -		1 1		, , , , , , , , , , , , , , , , , , , ,						
II CONT	KACTOR'S	S OR LAND	OWNER'	S CERTII	FICATION	: This wat	er well was	co	nstructed, re	construc	cted,	or plugge	:d		
Kaneag Wo	urisuiction a	ntractor'a I	picica on (f	no-gay-yea	۱۱) . ۸.۵.۸. . (۱۱) Thic ۱۱√o	f. ferrit. and ter Well D	u uns record	is iru mnla	te to the best of the ted on (mo-de)	ny KHO' Vear)	wied	ge and bener.	•		
under the h	usiness nam	e of	relevis	what	IIIS WA	L. SAIR	was co	III)	yeu on (mo-ugy-	y Carj.,	7	din and a landarine			
													_		
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topcka, Kansas 66612-1367. Telephone (785) 296-3565.												1565.			

KSA 82a-1212

Visit us at http://www.kdheks.gov/waterwell/index.html

Revised 9/10/2012