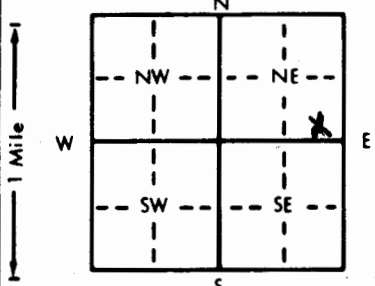


1 LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number  
 County: Pratt SE 1/4 SE 1/4 NE 1/4 11 T 26 S R 15 EW

Distance and direction from nearest town or city street address of well if located within city?  
 3 west 1/2 north of Byers, Ks.

2 WATER WELL OWNER: Gary Curtis  
 RR#, St. Address, Box #: Rt. 1-Box 60 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Byers, Ks. 67021 Application Number: 23468

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: 157 ft. ELEVATION:

Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft.  
 WELL'S STATIC WATER LEVEL . . . 51 . . . . . ft. below land surface measured on mo/day/yr . 7-15-91 . . . . .  
 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 . . 26 . . . . . in. to . . . . . 157 . . . . . ft., and . . . . . in. to . . . . . ft.  
 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 Lawn and garden only 10 Monitoring well . . . . .  
 Was a chemical/bacteriological sample submitted to Department? Yes . . . . . No  . . . . .; If yes, mo/day/yr sample was sub-  
 mitted Water Well Disinfected? Yes hth 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) Welded . . . . .  
 2 PVC 4 ABS 7 Fiberglass . . . . . Threaded . . . . .

Blank casing diameter . . 16 . . . . . in. to . . . . . 97 . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.  
 Casing height above land surface . . . . . 12 . . . . . in., weight . . . SDR 32.5 . . . . . 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) 11 Other (specify) . . . . .  
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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 . . . . . 97 . . . . . ft. to . . . . . 157 . . . . . ft., From . . . . . ft. to . . . . . ft.  
 From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  
 GRAVEL PACK INTERVALS: From . . . . . 20 . . . . . ft. to . . . . . 157 . . . . . 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 . . . . . 20 . . . . . 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 . . . . . old irrigation well

Direction from well? southwest How many feet? 38ft.

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	Sandy top soil			
5	16	Brown sandy clay			
16	21	Sandy white clay			
21	51	Gray and white clay			
51	54	Sandy brown and white clay			
54	60	Sand and gravel			
60	63	Gray clay			
63	84	Sand and gravel clean coarse loose			
84	96	Brown and white clay			
96	100	Sand and gravel			
100	103	Redish brown clay			
103	158	Sand and gravel clean coarse loose			

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) . . . . . 7-19-91 . . . . . and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . . . . 134 . . . . . This Water Well Record was completed on (mo/day/yr) . . . . . 8-14-91 . . . . . under the business name of Rosencrantz-Bemis by (signature) Media No don

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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY  
T  
R  
EW  
SEC.  
1/4  
1/4  
1/4