

1	LOCATION OF WATER WELL:	Fraction	Section Number			Township Number			Range Number		
County:	FORD	SW 1/4 NW 1/4 NW 1/4	12			T 26 S			R 25 E (W)		

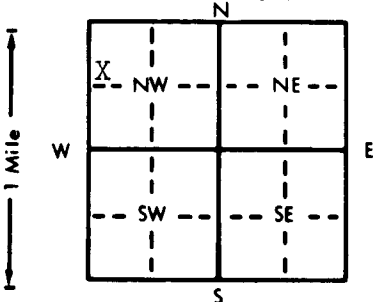
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Distance and direction from nearest town or city street address of well if located within city?

1 3/4 North of Dodge City, Kansas

2	WATER WELL OWNER:	Mr. Bob Lampe	
	RR#, St. Address, Box # :	3011 Westview	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code :	Dodge City, Kansas 67801	Application Number: ---

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL... 128 ft. ELEVATION: Slope.....



Depth(s) Groundwater Encountered 1. Not available ft. 2. ft. 3. ft.
WELL'S STATIC WATER LEVEL 76 ft. below land surface measured on mo/day/yr May 12, 1987

Pump test data:	Well water was ft. after hours pumping gpm
Est. Yield .. 20 ... gpm:	Well water was ft. after hours pumping gpm

Bore Hole Diameter 10 in. to 128 ft. and in. to ft.

WELL WATER TO BE USED AS:			
<input checked="" type="checkbox"/> Domestic	<input type="checkbox"/> 3 Feedlot	<input type="checkbox"/> 5 Public water supply	<input type="checkbox"/> 8 Air conditioning
<input type="checkbox"/> 2 Irrigation	<input type="checkbox"/> 4 Industrial	<input type="checkbox"/> 6 Oil field water supply	<input type="checkbox"/> 9 Dewatering
		<input type="checkbox"/> 7 Lawn and garden only	<input type="checkbox"/> 10 Observation well
			<input type="checkbox"/> 11 Injection well
			<input type="checkbox"/> 12 Other (Specify below)
		

Was a chemical/bacteriological sample submitted to Department? Yes.....No...XX...; If yes, mo/day/yr sample was submitted
Water Well Disinfected? Yes XX No

5 TYPE OF BLANK CASING USED:		5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued . <u>XX</u> . Clamped
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded
<u>XX</u> PVC	4 ABS	7 Fiberglass		Threaded

Blank casing diameter . . . 5 . . . in. to . 108 . . . ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.
Casing height above land surface . . 15 . . . in., weight . . 2.8 . . . lbs./ft. Wall thickness or gauge No. . . 265 . . .

TYPE OF SCREEN OR PERFORATION MATERIAL:			<input checked="" type="checkbox"/> PVC	<input type="checkbox"/> 10 Asbestos-cement
<input type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 Stainless steel	<input type="checkbox"/> 5 Fiberglass	<input type="checkbox"/> 8 RMP (SR)	<input type="checkbox"/> 11 Other (specify)
<input type="checkbox"/> 2 Brass	<input type="checkbox"/> 4 Galvanized steel	<input type="checkbox"/> 6 Concrete tile	<input type="checkbox"/> 9 ABS	<input type="checkbox"/> 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	<input checked="" type="checkbox"/> 7 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: From108..... ft. to128..... ft., From ft. to ft.
From ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From40..... ft. to128..... ft., From ft. to ft.
From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout ~~XXX~~ Bentonite 4 Other


Grout Intervals: From 0 ft. to 40 ft. From ft. to ft. From ft. to ft. From ft. to ft.

What is the nearest source of possible contamination:

<input checked="" type="checkbox"/> 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? North How many feet? 100

[illegible]

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) . . . May 14, 1987 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . . 252 This Water Well Record was completed on (mo/day/year) May 18, 1987 under the business name of FRIESEN WINDMILL & SUPPLY INC. by (signature) 

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle correct answers. Send top three copies to Kansas Department of Health and Environment, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.