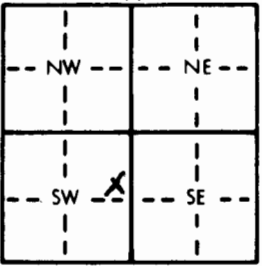


1 LOCATION OF WATER WELL: County: <u>Ford</u>	Fraction <u>SE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	Section Number <u>29</u>	Township Number <u>T 26</u> <u>S</u>	Range Number <u>R 25</u> <u>E/W</u>
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Distance and direction from nearest town or city street address of well if located within city?

1/2 mile west of Dodge City on West Park St.

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	<u>George Roskamp</u> <u>Hollywood Addition</u> <u>Dodge City, Ks 67801</u>	Board of Agriculture, Division of Water Resources Application Number:
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL: <u>160'</u> ft. ELEVATION: Depth(s) Groundwater Encountered 1. <u>30'</u> ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL <u>30'</u> ft. below land surface measured on mo/day/yr <u>8-24-81</u> Pump test data: Well water was ft. after hours pumping gpm Est. Yield <u>25</u> gpm: Well water was ft. after hours pumping gpm Bore Hole Diameter <u>8"</u> in. to <u>160'</u> ft. and in. to ft. WELL WATER TO BE USED AS: <input checked="" type="checkbox"/> 1 Domestic <input type="checkbox"/> 3 Feedlot <input type="checkbox"/> 6 Oil field water supply <input type="checkbox"/> 9 Dewatering <input type="checkbox"/> 12 Other (Specify below) <input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 4 Industrial <input type="checkbox"/> 7 Lawn and garden only <input type="checkbox"/> 10 Observation 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
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5 TYPE OF BLANK CASING USED: 1 Steel <input checked="" type="checkbox"/> 2 PVC Blank casing diameter <u>8"</u> in. to <u>140</u> ft. Dia. in. to ft. Dia. in. to ft. Casing height above land surface <u>18"</u> in. weight lbs./ft. Wall thickness or gauge No. <u>250</u>	3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) CASING JOINTS: <input checked="" type="checkbox"/> Glibed <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter SCREEN-PERFORATED INTERVALS: From <u>140</u> ft. to <u>160</u> ft. From ft. to ft. From ft. to ft. GRAVEL PACK INTERVALS: From <u>0</u> ft. to <u>3'</u> ft. From ft. to ft. From ft. to ft. From <u>15'</u> ft. to <u>160'</u> ft. From ft. to ft. From ft. to ft.	<input checked="" type="checkbox"/> 7 PVC 10 Asbestos-cement 11 Other (specify) 12 None used (open hole) 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 11 None (open hole) 9 Drilled holes 10 Other (specify)

6 GROUT MATERIAL: Grout Intervals: From <u>3</u> ft. to <u>15</u> ft. From ft. to ft. From ft. to ft. From ft. to ft.	1 Neat cement 2 Cement grout 3 Bentonite 4 Other What is the nearest source of possible contamination: <input checked="" type="checkbox"/> Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)
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Direction from well? <u>SW</u>	How many feet? <u>200 feet</u>
FROM TO LITHOLOGIC LOG	FROM TO LITHOLOGIC LOG
0-3 Topsoil	
3 10' Sand	
10- 25' Gravel	
25- 125 Clay	
125 160 Gravel	

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) <u>8-24-81</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>111</u> . This Water Well Record was completed on (mo/day/yr) <u>8-25-81</u> under the business name of <u>Cragg Well Drilling</u> by (signature) <u>Merle Cragg</u>
INSTRUCTIONS: Use typewriter or ballpoint 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.