

1) LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Gray		NW 1/4 NW 1/4 SE 1/4		22		T 26 S		R 28 E	
Distance and direction from nearest town or city street address of well if located within city?									
From Cimmaron: 3 South, 2 1/2 West, 1/2 North									
2) WATER WELL OWNER: D M & M Feedyard									
RR#, St. Address, Box #: P.O. Box 668					Board of Agriculture, Division of Water Resources				
City, State, ZIP Code: Cimmaron, KS 67835					Application Number: 39560				
3) LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:									
4) DEPTH OF COMPLETED WELL: 247 ft. ELEVATION:									
Depth(s) Groundwater Encountered 1. 75 ft. 2. ft. 3. ft.									
WELL'S STATIC WATER LEVEL 75 ft. below land surface measured on mo/day/yr									
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 17 1/2 in. to 247 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 XX; If yes, mo/day/yr sample was submitted									
Water Well Disinfected? Yes XX No									
5) TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped									
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded									
7 Fiberglass Threaded									
Blank casing diameter 8.5/8 in. to 212 ft., Dia in. to ft., Dia in. to ft.									
Casing height above land surface 24 in., weight lbs./ft. Wall thickness or gauge No. 37.5									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement									
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify)									
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 212 ft. to 247 ft., From ft. to ft.									
From ft. to ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From 247 ft. to 20 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 20 ft. to 0 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									
Direction from well? How many feet?									
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
0 42 Fine Sand, Clay Streaks									
42 162 Large to Medium Gravel Loose									
162 215 Coarse Sand Small Gravel Small Clay									
215 225 Tan Sandy Clay									
225 230 Coarse Sand, Loose									
230 240 Sandy Clay, Sand Streaks									
240 245 Coarse Sand Small Gravel Loose									
245 260 Blue Shale									
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) 08-02-91 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 514 This Water Well Record was completed on (mo/day/yr) 08-29-91 under the business name of Miller Gearhead & Pump Repair, Inc. by (signature) [Signature]									
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.									