

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number			
County: Gray		SW 1/4 SW 1/4 SW 1/4		15		T 26 S		R 29 EW			
Distance and direction from nearest town or city street address of well if located within city? From Ingalls go South to curve lmi on South west into location.											
2 WATER WELL OWNER: Don R. Rennick Clyde M. Becker											
RR#, St. Address, Box # : City, State, ZIP Code : Ingalls, Kansas Board of Agriculture, Division of Water Resources Application Number: T 85-433											
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 225 ft. ELEVATION:									
<div style="text-align: center;">N 1 Mile W E S X</div>		Depth(s) Groundwater Encountered 1. 130 ft. 2. ft. 3. ft.									
		WELL'S STATIC WATER LEVEL 95 ft. below land surface measured on mo/day/yr 5/15/85									
		Pump test data: Well water was ft. after hours pumping gpm									
		Est. Yield 75 gpm: Well water was ft. after hours pumping gpm									
		Bore Hole Diameter 9 in. to 225 ft., and in. to ft.									
WELL WATER TO BE USED AS:											
1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well											
2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)											
7 Lawn and garden only 10 Observation well											
Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted											
Water Well Disinfected? Yes No											
5 TYPE OF BLANK CASING USED:											
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: <u>Glued</u> Clamped											
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) <u>Welded</u>											
7 Fiberglass Threaded.											
Blank casing diameter 5 1/2 in. to 160 ft., Dia. in. to ft., Dia. in. to ft.											
Casing height above land surface 28 in., weight 2.85 lbs./ft. Wall thickness or gauge No. 265											
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:											
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 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: From 160 ft. to 225 ft., From ft. to ft.											
From ft. to ft., From ft. to ft.											
GRAVEL PACK INTERVALS: From 45 ft. to 225 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 10 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? Northwest of water well How many feet? 120'											
FROM		TO		LITHOLOGIC LOG		FROM		TO		LITHOLOGIC LOG	
0		2		surface							
2		53		sandy clay							
53		81		gravel							
81		97		clay							
97		118		med. to large sand							
118		146		40% clay & 60% med. to large sand							
146		218		med. to large sand with clay streaks							
218		225		black 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) May 15, 1985 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 118 This Water Well Record was completed on (mo/day/yr) May 22, 1985 under the business name of Carlile Water Well Service, Inc. by (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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.											