

1 LOCATION OF WATER WELL:		Fraction SE 1/4	Section Number SE 1/4	Township Number SE 1/4	Range Number 16	R 29	E/W 26
County: GRAY Distance and direction from nearest town or city street address of well if located within city?							
3 MILES SOUTH INGALLS WEST SIDE							
2 WATER WELL OWNER: DON MILLERSASKI INGALLS, KS. 67853				Board of Agriculture, Division of Water Resources Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 210 ft. ELEVATION: Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL 118 ft. below land surface measured on mo/day/yr 11/28/89 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 9 7/8 in. to 210 ft., and in. to ft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well <input checked="" type="checkbox"/> 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 submitted Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>					
5 TYPE OF BLANK CASING USED:		1 Steel <input checked="" type="checkbox"/>	3 RMP (SR) <input type="checkbox"/>	5 Wrought iron <input type="checkbox"/>	6 Asbestos-Cement <input type="checkbox"/>	8 Concrete tile <input type="checkbox"/>	CASING JOINTS: Glued Clamped Welded Threaded Blank casing diameter in. to ft., Dia in. to ft., Dia in. to ft. Casing height above land surface in., weight lbs./ft. Wall thickness or gauge No. 200
TYPE OF SCREEN OR PERFORATION MATERIAL:							
SCREEN OR PERFORATION OPENINGS ARE:		1 Steel <input type="checkbox"/>	3 Stainless steel <input type="checkbox"/>	5 Fiberglass <input type="checkbox"/>	8 RMP (SR) <input type="checkbox"/>	10 Asbestos-cement <input type="checkbox"/>	11 Other (specify) 12 None used (open hole) 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole) 12 None used (open hole) 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)
SCREEN-PERFORATED INTERVALS:		From 190 ft. to 210 ft., From ft. to ft.	From ft. to ft., From ft. to ft.	From ft. to ft., From ft. to ft.	From ft. to ft., From ft. to ft.	From ft. to ft., From ft. to ft.	
GRAVEL PACK INTERVALS:		From 100 ft. to ft., From ft. to ft.	From ft. to ft., From ft. to ft.	From ft. to ft., From ft. to ft.	From ft. to ft., From ft. to ft.		
6 GROUT MATERIAL:		1 Neat cement <input type="checkbox"/>	2 Cement grout <input type="checkbox"/>	3 Bentonite <input type="checkbox"/>	4 Other Grout Intervals: From 4 ft. to 100 ft., From ft. to ft., From ft. to ft.	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)	
What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy <input checked="" type="checkbox"/> 2 Sewer lines 5 Cess pool 8 Sewage lagoon 3 Watertight sewer lines 6 Seepage pit 9 Feedyard How many feet?							
Direction from well? FROM TO NORTH LITHOLOGIC LOG FROM TO 100 PLUGGING INTERVALS							
0	10	FINE SAND	190	210	FINE TO MED SAND AND GRAVEL		
10	60	BROWN SANDY CLAY					
60	80	COURSE GRAVEL					
80	91	FINE TO MED SAND AND GRAVEL					
91	10-0	BROWN SANDY CLAY					
100	152	FINE TO MED SAND AND GRAVEL (LOOSE)					
152	158	BROWN CLAY					
58	166	FINE TO MED SAND AND GRAVEL (LOOSE)					
7	166 190 BROWN SANDY CLAY CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 11/28/89 and this record is true to the best of my knowledge and belief. Kansas						
Water Well Contractor's License No. 172 This Water Well Record was completed on (mo/day/yr) 7/91 by (signature) <i>mej</i>							
under the business name of JOHNSON DRILLING CO.							
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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.							