

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>KEARNY</u>		<u>SE</u> 1/4 <u>NW</u> 1/4 <u>SW</u> 1/4	<u>6</u>	T <u>26</u> <u>(S)</u>	R <u>38</u> <u>(EW)</u>
Distance and direction from nearest town or city street address of well if located within city? <u>Ulysses - 14 mi. North - 9 mi. West - 2 1/2 mi. North & East -></u>					
2 WATER WELL OWNER: <u>CARL MARTIN</u>					
RR#, St. Address, Box # : <u>110 COLLEGE</u>					
City, State, ZIP Code : <u>WINFIELD, KANSAS 67156</u>					
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: <u>580</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>275</u> 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 <u>12 1/4</u> in. to <u>26</u> ft. and <u>9 1/4</u> in. to <u>580</u> 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 <u>X</u> If yes, mo/day/yr sample was submitted					
Water Well Disinfected? Yes <u>X</u> No					
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <u>X</u> Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____					
Blank casing diameter <u>5.56</u> in. to <u>480</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height above land surface <u>30</u> in., weight <u>200</u> lbs./ft. Wall thickness or gauge No. <u>5DR-21</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____ 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot 3 Mill slot <u>.032</u> 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 <u>480</u> ft. to <u>580</u> ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>470</u> ft. to <u>580</u> ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grout Intervals: From <u>5</u> ft. to <u>26</u> ft. From <u>460</u> ft. to <u>470</u> 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? <u>North</u> How many feet? <u>250</u>					
LITHOLOGIC LOG					
FROM	TO		FROM	TO	PLUGGING INTERVALS
0	2	Top Soil	377	465	Blue Clay & Shale w/ soft sandstone
2	29	Brown Clay & Caliche			+ fine sand
29	93	Tan Sandy Clay w/ med. Gravel	465	478	Black Shale & Rock
93	112	Tan Sandy Clay & Fine Sand	478	486	
112	123	Yellow Sandy Clay	486	497	Black Clay & Shale
123	128	Sand & Gravel	497	565	Sandstone & fine sand w/ white
128	168	Red, Yellow & Brown Clay & Shale	565	580	Sandy Clay streaks
168	178	Yellow Clay & Sandstone			Rock & Redbed
178	249	Brown & Gray Clay w/ sandstone			
249	269	Gray, white & Blue Clay & Shale			
269	271	Fine Sand			
271	286	Blue Clay & Shale			
286	298	Fine Sand w/ Blue Shale streaks			
298	363	Blue & Gray Shale & Rock			
363	377	Blue Clay & 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) <u>9-17-97</u> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <u>600-A</u> This Water Well Record was completed on (mo/day/yr) <u>9-22-97</u>					
under the business name of <u>CRAMER DRIG. Co.</u> by (signature) <u>Ray Cramer</u>					
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.					

OFFICE USE ONLY

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