

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	<u>reno</u>	<u>NE 1/4 SW 1/4 SW 1/4</u>	<u>27</u>	<u>T 26 S</u>	<u>R 5 E/W</u>

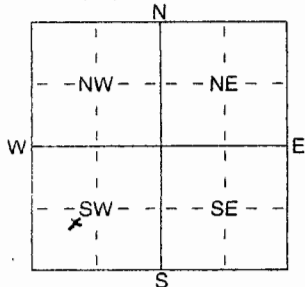
Distance and direction from nearest town or city street address of well if located within city?
S East 1 3/4 South of Pretty Prairie

2 WATER WELL OWNER: Mike Cox
RR#, St. Address, Box # : 904 Stout St.
City, State, ZIP Code : Platt KS 67124

Board of Agriculture, Division of Water Resources
Application Number:

3	LOCATE WELL'S LOCATION WITH	4	DEPTH OF COMPLETED WELL 80 ft. ELEVATION:
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AN "X" IN SECTION BOX:



Depth(s) Groundwater Encountered 1 13 ft. 2 _____ ft. 3 _____ ft.
WELL'S STATIC WATER LEVEL 13 ft. below land surface measured on mo/day/yr _____
Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
Est. Yield 20 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
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 Domestic (lawn & garden) 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 No

5	TYPE OF BLANK CASING USED:
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1 Steel	3 RMP (SR)
2 PVC	4 ABS

5 Wrought iron
6 Asbestos-Cement
7 Fiberglass

8 Concrete tile
9 Other (specify below)

CASING JOINTS: Glued ☒ Clamped
Welded
Threaded

Blank casing diameter 5 in. to 40 ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface 30 in., weight 5.08 21 lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel
2 Brass	4 Galvanized Steel

5 Fiberglass
6 Concrete tile

7 PVC
8 RMP (SR)
9 ABS

10 Asbestos-Cement
11 Other (Specify)
12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot 3 Mill slot
2 Louvered shutter 4 Key punched

5 Guazed wrapped
6 Wire wrapped
7 Torch cut

8 Saw cut
9 Drilled holes
10 Other (specify) _____
11 None (open hole)

SCREEN-PERFORATED INTERVALS: From 40 ft. to 80 ft., From _____ ft. to _____ ft.

From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From 27 ft. to 80 ft., From _____ ft. to _____ ft.

From ft. to ft., From ft. to ft.

6	GROUT MATERIAL:
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1 Neat cement

2 Cement grout

③ Bentonite

4 Other

Grout Intervals: From 0 ft. to 27 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines
2 Sewer lines	5 Cess pool
3 Watertight sewer lines	6 Seepage pit

7 Pit privy
8 Sewage lagoon
9 Feedyard

10 Livestock pens	14 Abandoned water well
11 Fuel storage	15 Oil well/Gas well
12 Fertilizer storage	16 Other (specify below)
13 Insecticide storage	

Direction from well?

NA

How many feet? *NA*

[illegible]

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) 8-29-07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 677 This Water Well Record was completed on (mo/day/yr) 8-29-07 under the business name of CIT Inc by (signature) chx D.

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.