

1] LOCATION OF WATER WELL: County: <u>Reno</u>		Fraction <u>SE 1/4 SE 1/4 SW 1/4</u>		Section Number <u>30</u>		Township Number <u>T 26 S</u>		Range Number <u>R 6 E</u>	
Distance and direction from nearest town or city street address of well if located within city? <u>2 mi S 1/2 E of Pretty Prairie</u>									
2] WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code : <u>Rt 2</u> <u>Pretty Prairie, KS 67570</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>94</u> ft. ELEVATION: Depth(s) Groundwater Encountered 1. <u>94</u> ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL <u>12</u> ft. below land surface measured on mo/day/yr <u>6-29-84</u> Pump test data: Well water was <u>17</u> ft. after <u>1</u> hours pumping <u>25</u> gpm Est. Yield <u>50</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter <u>10</u> in. to <u>34</u> ft., and <u>5</u> in. to <u>94</u> ft. WELL WATER TO BE USED AS: <u>1</u> Domestic <u>2</u> Irrigation <u>3</u> Feedlot <u>4</u> Industrial <u>6</u> Oil field water supply <u>7</u> Lawn and garden only <u>5</u> Public water supply <u>10</u> Observation well <u>8</u> Air conditioning <u>11</u> Injection well <u>9</u> Dewatering <u>12</u> Other (Specify below)						
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: <u>2</u> 1 Steel <u>2</u> PVC Blank casing diameter <u>6</u> in. to <u>34</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface <u>12</u> in., weight <u>3.25</u> lbs./ft. Wall thickness or gauge No. <u>160</u> <u>3</u> RMP (SR) <u>4</u> ABS <u>5</u> Wrought iron <u>6</u> Asbestos-Cement <u>7</u> Fiberglass <u>8</u> Concrete tile <u>9</u> Other (specify below) _____ 					CASING JOINTS: Glued <u>X</u> Clamped _____ Welded _____ Threaded _____				
TYPE OF SCREEN OR PERFORATION MATERIAL: <u>1</u> Steel <u>2</u> Brass <u>3</u> Stainless steel <u>4</u> Galvanized steel <u>5</u> Fiberglass <u>6</u> Concrete tile <u>7</u> PVC <u>8</u> RMP (SR) <u>9</u> ABS <u>10</u> Asbestos-cement <u>11</u> Other (specify) _____ <u>12</u> None used (open hole)					SCREEN OR PERFORATION OPENINGS ARE: <u>1</u> Continuous slot <u>2</u> Louvered shutter <u>3</u> Mill slot <u>4</u> Key punched <u>5</u> Gauzed wrapped <u>6</u> Wire wrapped <u>7</u> Torch cut <u>8</u> Saw cut <u>9</u> Drilled holes <u>10</u> Other (specify) _____ <u>11</u> None (open hole)				
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.					GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.				
6] GROUT MATERIAL: <u>1</u> Neat cement Grout Intervals: From <u>3</u> ft. to <u>13</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					2 Cement grout 3 Bentonite 4 Other _____				
What is the nearest source of possible contamination: <u>1</u> Septic tank <u>2</u> Sewer lines <u>3</u> Watertight sewer lines <u>4</u> Lateral lines <u>5</u> Cess pool <u>6</u> Seepage pit <u>7</u> Pit privy <u>8</u> Sewage lagoon <u>9</u> Feedyard <u>10</u> Livestock pens <u>11</u> Fuel storage <u>12</u> Fertilizer storage <u>13</u> Insecticide storage <u>14</u> Abandoned water well <u>15</u> Oil well/Gas well <u>16</u> Other (specify below) _____					Direction from well? <u>S</u> How many feet? <u>100</u>				

[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) 6-30-84 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 447 This Water Well Record was completed on (mo/day/yr) 11-2-84 under the business name of Miller Drilling by (signature) Egn Miller

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.