

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <b>Pratt</b>		<b>SE 1/4 SE 1/4 NW 1/4</b>	<b>30</b>	<b>T 27 S</b>	<b>R 11W EW</b>

Distance and direction from nearest town or city street address of well if located within city?

1 1/2 N of Cairo, Kansas

2 WATER WELL OWNER:		Gabbert & Jones	Greer No. 1
RR#, St. Address, Box # :		830 Sutton Pl.	Board of Agriculture, Division of Water Resources
City, State, ZIP Code :		Pratt, Ks. 67124 Wichita, Ks. 67202	Application Number: <u>Unknown</u>

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>80</u> ft. ELEVATION: <u>Unknown</u>				
		Depth(s) Groundwater Encountered 1. <u>19</u> ft. 2. . . . . ft. 3. . . . . ft.	WELL'S STATIC WATER LEVEL . . . . . <u>19</u> ft. below land surface measured on mo/day/yr . . . . . <u>8/20/83</u>			
		Pump test data: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm	Est. Yield . . . . . <u>60</u> gpm: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm			
		Bore Hole Diameter . . . . . <u>8</u> in. to <u>80</u> . . . . . ft., and . . . . . in. to . . . . . ft.	WELL WATER TO BE USED AS:			
		5 Public water supply	8 Air conditioning	11 Injection well		
		1 Domestic	3 Feedlot	6 <u>Oil field water supply</u>	9 Dewatering	12 Other (Specify below)
		2 Irrigation	4 Industrial	7 Lawn and garden only	10 Observation well	
Was a chemical/bacteriological sample submitted to Department? Yes . . . . . <u>No</u> . . . . .; If yes, mo/day/yr sample was submitted		Water Well Disinfected? Yes <u>No</u>				

5 TYPE OF BLANK CASING USED:		5 Wrought iron	8 Concrete tile	CASING JOINTS: <u>Glued</u> . . . . . Clamped . . . . .
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded . . . . .
<u>2 PVC</u>	4 ABS	7 Fiberglass		Threaded . . . . .
Blank casing diameter . . . . . <u>5</u> in. to <u>60</u> . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.		Casing height above land surface . . . . . <u>12</u> in., weight . . . . . <u>2.8</u> lbs./ft. Wall thickness or gauge No. . . . . <u>Sch. 40</u>		
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 <u>PVC</u>		
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify) . . . . .
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped	8 <u>Saw cut</u>	11 None (open hole)
1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes	
2 Louvered shutter	4 Key punched	7 <u>Torch cut</u>	10 Other (specify) . . . . .	
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:		1 <u>Neat cement</u>	2 Cement grout	3 Bentonite	4 Other . . . . .
Grout Intervals: From . . . . . <u>0</u> ft. to . . . . . <u>10</u> . . . . . ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.					
What is the nearest source of possible contamination:		10 Livestock pens		14 Abandoned water well	
1 Septic tank	4 Lateral lines	7 Pit privy	11 Fuel storage	15 <u>Oil well/Gas well</u>	
2 Sewer lines	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	16 Other (specify below)	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage		
Direction from well? <u>South</u>		How many feet? <u>60</u>			

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	8	Clay			
8	80	Sand and Gravel			

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) . . . . . 8/20/83 . . . . . and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . . . . 186 . . . . . This Water Well Record was completed on (mo/day/yr) . . . . . 9/30/83 . . . . .

under the business name of Kellys Water Well Service by (signature) Deary Jones

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.

OFFICE USE ONLY  
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SE 1/4  
SE 1/4  
NW 1/4