

1 LOCATION OF WATER WELL	Fraction SW 1/4 SW 1/4 NE 1/4	Section Number 34	Township Number T 27 S	Range Number R 13W EW
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County: **PRATT** Distance and direction from nearest town or city? **IN TOWN** Street address of well if located within city? **922 LAWRENCE, PRATT, KS.**

2 WATER WELL OWNER: RR#, St. Address, Box #: **922 LAWRENCE** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **PRATT, KS. 67124** Application Number: **9566-CITY**

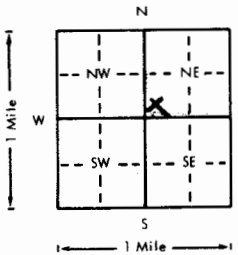
3 DEPTH OF COMPLETED WELL: **95'** ft. Bore Hole Diameter: **7 1/2** in. to **95'** ft., and ... in. to ... ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 6 Oil field water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 7 **Lawn and garden only** 9 Dewatering 12 Other (Specify below)
 10 Observation well
 Well's static water level: **48'** ft. below land surface measured on **6-** month **10, 13** day **81** year
 Pump Test Data: Well water was ... ft. after ... hours pumping ... gpm
 Est. Yield gpm: Well water was ... ft. after ... hours pumping ... gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: **Glued** Clamped
 2 PVC **4"** 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded
 7 Fiberglass Threaded
 Blank casing dia **4"** in. to **95** ft., Dia ... in. to ... ft., Dia ... in. to ... ft.
 Casing height above land surface: **18"** in., weight ... lbs./ft. Wall thickness or gauge No ...
 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 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-Perforation Dia: **3" x 1/16"** in. to ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft.
 Screen-Perforated Intervals: From **85** ft. to **95** ft., From ... ft. to ... ft., From ... ft. to ... ft.
 Gravel Pack Intervals: From **75** ft. to **95** ft., From ... ft. to ... ft., From ... ft. to ... ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 **Bentonite** 4 Other
 Grouted Intervals: From **0** ft. to **20** ft., From ... ft. to ... ft., From ... ft. to ... ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)
 13 **Watertight sewer lines**
 Direction from well: **EAST** How many feet: **25-30** ? Water Well Disinfected? **Yes** No
 Was a chemical/bacteriological sample submitted to Department? **No** If yes, date sample was submitted ... month ... day ... year: Pump Installed? **Yes** **No**
 If Yes: Pump Manufacturer's name ... Model No. ... HP ... Volts ...
 Depth of Pump Intake ... ft. Pumps Capacity rated at ... gal./min.
 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was **(1)** constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on **JUNE** month **10, 1981** day **10, 1981** year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **410**
 This Water Well Record was completed on **6-10-81** month ... day ... year under the business name of **LEK DRILLING** by (signature) **Garry D. Greenlee**

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	10	Soil			
10	15	YELLOW CLAY			
15	20	CLAY - SAND			
20	25	LIMESTONE SAND, CLAY			
25	40	SANDY CLAY			
40	55	MED-CRS. SAND			
55	65	CRS. SAND			
65	70	ROCKS, CLAY			
70	75	FINE-CRS SAND, CLAY			
75	80	MED-CRS SAND			
80	95	MED-CRS SAND			

Depth(s) Groundwater Encountered 1. **80** ft. 2. ... ft. 3. ... ft. 4. ... ft. (Use a second sheet if needed)

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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY
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27
R
13
SEC 34
SW 1/4
SE 1/4