

1 LOCATION OF WATER WELL		Fraction		Section Number		Township Number		Range Number					
County: <u>Kiowa</u>		C <u>1/4 SW 1/4 SE 1/4</u>		13		T 27 S		R 16W E/W					
Distance and direction from nearest town or city? <u>5 1/2 N of Wellsford, Kansas</u>				Street address of well if located within city?									
2 WATER WELL OWNER:		<u>Red Tiger Drilling co.</u>											
RR#, St. Address, Box # :		<u>1720 Kansas State Bank Bldg.</u>				Board of Agriculture, Division of Water Resources							
City, State, ZIP Code :		<u>Wichita, Kansas 67202</u>				Application Number: <u>T81-276</u>							
3 DEPTH OF COMPLETED WELL:		<u>100</u> ft. Bore Hole Diameter <u>8</u> in. to <u>100</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		<u>6 Oil field water supply</u>		9 Dewatering		12 Other (Specify below)							
2 Irrigation 4 Industrial		7 Lawn and garden only		10 Observation well									
Well's static water level		<u>33</u> ft. below land surface measured on _____		<u>4</u> month <u>28</u> day		<u>1981</u> year							
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							
4 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		Welded _____							
2 <u>PVC</u>		4 ABS		7 Fiberglass		Threaded _____							
Blank casing dia <u>5</u> in. to <u>80</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>		10 Asbestos-cement									
1 Steel		3 Stainless steel		5 Fiberglass		8 RMP (SR)							
2 Brass		4 Galvanized steel		6 Concrete tile		9 ABS							
11 Other (specify) _____		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 Torch cut		10 Other (specify) _____							
Screen-Perforation Dia. <u>5</u> in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.													
Screen-Perforated Intervals:		From <u>80</u> ft. to <u>100</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.											
Gravel Pack Intervals:		From <u>10</u> ft. to <u>100</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.											
5 GROUT MATERIAL:		1 Neat cement		2 Cement grout		3 <u>Bentonite</u>		4 Other _____					
Grouted Intervals: From _____ ft. to <u>10</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.													
What is the nearest source of possible contamination:		10 Fuel storage		14 Abandoned water well									
1 Septic tank		4 Cess pool		7 Sewage lagoon		11 Fertilizer storage		15 <u>Oil well/Gas well</u>					
2 Sewer lines		5 Seepage pit		8 Feed yard		12 Insecticide storage		16 Other (specify below)					
3 Lateral lines		6 Pit privy		9 Livestock pens		13 Watertight sewer lines							
Direction from well <u>East</u> How many feet <u>60</u> ? Water Well Disinfected? Yes <u>No</u>													
Was a chemical/bacteriological sample submitted to Department? Yes <u>No</u> If yes, date sample _____ month _____ day _____ year: Pump Installed? Yes <u>No</u>													
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) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month _____ day _____ year													
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>186</u>													
This Water Well Record was completed on _____ month _____ day _____ year under the business name of <u>Kellys Water Well Service</u> by (signature) <u>Kelly Price</u>													
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM		TO		LITHOLOGIC LOG		FROM		TO		LITHOLOGIC LOG	
		0		40		Clay							
		40		100		Sand and Gravel							
ELEVATION: <u>Unknown</u>													
Depth(s) Groundwater Encountered 1. <u>33</u> 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  
T  
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SEC. 13  
C  
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