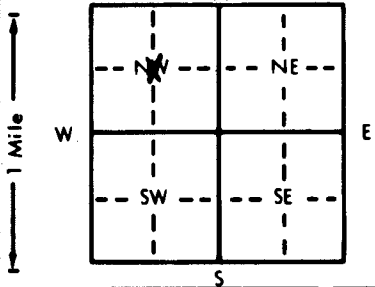


1 LOCATION OF WATER WELL: Fraction center Section Number 33 Township Number T 27 Range Number R 16  
 County: Kiowa

Distance and direction from nearest town or city street address of well if located within city?  
1 East, 2 3/4 North, 1/4 East, of Haviland, Ks.

2 WATER WELL OWNER: Elmer Davis  
 RR#, St. Address, Box # : \_\_\_\_\_  
 City, State, ZIP Code : Haviland, Ks. 67059  
 Board of Agriculture, Division of Water Resources  
 Application Number: 37,087

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



4 DEPTH OF COMPLETED WELL: 170 ft. ELEVATION: \_\_\_\_\_

Depth(s) Groundwater Encountered 1. 62.3 ft. 2. \_\_\_\_\_ ft. 3. \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL 62.3 ft. below land surface measured on mo/day/yr 14 June, 85  
 Pump test data: Well water was 71.8 ft. after 1 hours pumping 900 gpm  
 Est. Yield \_\_\_\_\_ gpm: Well water was 75.7 ft. after 1 hours pumping 1200 gpm  
 Bore Hole Diameter: 30 in. to 170 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 Oil field water supply 9 Dewatering 12 Other (Specify below)  
XX2 Irrigation XX 4 Industrial 7 Lawn and garden only 10 Observation well  
 Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No X; If yes, mo/day/yr sample was submitted \_\_\_\_\_  
 Water Well Disinfected? Yes X No \_\_\_\_\_

5 TYPE OF BLANK CASING USED:  
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued \_\_\_\_\_ Clamped \_\_\_\_\_  
PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded X  
 7 Fiberglass Threaded \_\_\_\_\_

Blank casing diameter 16 in. to 110 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface 12 in., weight 42.05 lbs./ft. Wall thickness or gauge No. 250

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 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-PERFORATED INTERVALS: From 110 ft. to 170 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From 10 ft. to 170 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout XXX Bentonite XXX 4 Other \_\_\_\_\_  
 Grout Intervals: From 0 ft. to 10 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:  
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)  
 13 Insecticide storage \_\_\_\_\_ None

Direction from well? \_\_\_\_\_ How many feet? \_\_\_\_\_

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	sandy top soil			
2	14	sand, fine and silty			
14	24	Clay, tan			
24	32	sand, fine			
32	60	Clay, brown and tan			
60	120	sand, fine to coarse, fine to med gravel with few clay streaks			
120	170	sand, fine to coarse and fine to coarse gravel			
170	180	Clay, gray and white			

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) 14 June 85 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 325 This Water Well Record was completed on (mo/day/yr) 26 Aug, 85 under the business name of Central Well & Pump, Inc. by (signature) [Signature]

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.