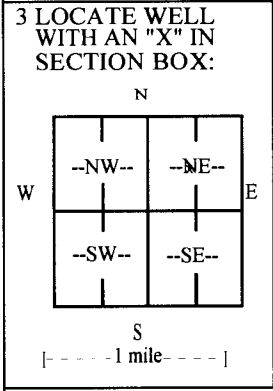


<b>1 LOCATION OF WATER WELL:</b>	Fraction	Section Number	Township No.	Range Number
County: <b>Kiowa</b>	1/4 1/4 <b>NC</b> 1/4 <b>NE</b> 1/4	1	T 27 S	R 20 <input type="checkbox"/> E <input checked="" type="checkbox"/> W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here   
 Approximately 9 miles north and 9 miles west of Greensburg.

**Global Positioning System (GPS) information:**  
 Latitude: 37.730498 (in decimal degrees)  
 Longitude: -99.454515 (in decimal degrees)  
 Elevation: Unknown  
 Datum:  WGS 84,  NAD 83,  NAD 27  
 Collection Method:  
 GPS unit (Make/Model: **WAAS**)  
 Digital Map/Photo,  Topographic Map,  Land Survey  
 Est. Accuracy:  <3 m,  3-5 m,  5-15 m,  >15 m

**2 WATER WELL OWNER:** Roger Stotts  
 RR#, Street Address, Box #: 22259 183 Hwy  
 City, State, ZIP Code : Greensburg, KS 67054



**4 DEPTH OF COMPLETED WELL** 131 ft.  
 Depth(s) Groundwater Encountered (1) \_\_\_\_\_ ft. (2) \_\_\_\_\_ ft. (3) \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL 52 ft. below land surface measured on mo/day/yr 01/30/15  
 Pump test data: Well water was not checked ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 EST. YIELD \_\_\_\_\_ gpm. Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Bore Hole Diameter 30 in. to 131 ft., and \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 WELL WATER TO BE USED AS:  Public water supply  Geothermal  Injection well  
 Domestic  Feedlot  Oil field water supply  Dewatering  Other (Specify below)  
 Irrigation  Industrial  Domestic-lawn & garden  Monitoring well  
 Was a chemical/bacteriological sample submitted to Department?  Yes  No  
 If yes, mo/day/yr sample was submitted \_\_\_\_\_  
 Water well disinfected?  Yes  No

**5 TYPE OF CASING USED:**  Steel  PVC  Other  
 CASING JOINTS:  Glued  Clamped  Welded  Threaded  Other (Specify)  
 Casing diameter 16 in. to 73 ft., Diameter 16 in. to 97 ft., Diameter 16 in. to 115 ft.  
 Casing height above land surface 12 in., Weight 19.75 lbs./ft., Wall thickness or gauge No. 616  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 Steel  Stainless Steel  PVC  Other (Specify)  
 Brass  Galvanized Steel  None used (open hole)  
 SCREEN OR PERFORATION OPENINGS ARE:  
 Continuous slot  Mill slot  Gauze wrapped  Torch cut  Drilled holes  None (open hole)  
 Louvered shutter  Key punched  Wire wrapped  Saw cut  Other (specify)  
 SCREEN-PERFORATED INTERVALS: From 73 ft. to 83 ft., From 97 ft. to 111 ft.  
 From 115 ft. to 130 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 GRAVEL PACK INTERVALS: From 22 ft. to 131 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**6 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other  
 Grout Intervals: From 2 ft. to 22 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 What is the nearest source of possible contamination:  
 Septic tank  Lateral lines  Pit privy  Livestock pens  Insecticide storage  Other (specify below)  
 Sewer lines  Cesspool  Sewage lagoon  Fuel storage  Abandoned water well  
 Watertight sewer lines  Seepage pit  Feedyard  Fertilizer storage  Oil well/gas well  
 Direction from well \_\_\_\_\_ Distance from well \_\_\_\_\_  
 None Known

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Topsoil			
2	17	Clay, sandy, brown			
17	83	Sand & gravel, fine to coarse			
83	85	Clay, white, caliche			
85	97	Clay, yellow, tan, sand streaks			
97	111	Sand & gravel, fine to coarse			
111	115	Clay, white, caliche			
115	130	Sand, fine to coarse, medium gravel			
130	131	Clay, gray			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was  constructed,  reconstructed, or  plugged under my jurisdiction and was completed on (mo/day/year) 01/30/15 and this record is true to the best of my knowledge and belief.  
 Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 02/02/15  
 under the business name of **Clarke Well & Equipment, Inc.** by (signature) \_\_\_\_\_

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.