

1 LOCATION OF WATER WELL		Fraction DBB		Section Number		Township Number		Range Number					
County: FORD		NW 1/4 NW 1/4 SE 1/4		4		T 27 S		R 22 EW					
Distance and direction from nearest town or city? FORD 1/4N 1/2E 5N 1/2E NORTHSIDE				Street address of well if located within city? BUCKLIN NW									
2 WATER WELL OWNER: EAGLE DRILLING INC.				Board of Agriculture, Division of Water Resources									
RR#, St. Address, Box # 210 ROCKBOROUGH BLDG. 260 N. ROCK RD.				Application Number:									
City, State, ZIP Code WICHITA, KS. 67206													
3 DEPTH OF COMPLETED WELL 55 ft. Bore Hole Diameter 9 in. to 55 ft., and													
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) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well									
Well's static water level 18 ft. below land surface measured on June month 19 day 1980 year													
Pump Test Data NONE 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:				Casing Joints: Glued XX Clamped _____									
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Welded _____													
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Threaded _____													
Blank casing dia 5 in. to 35 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.													
Casing height above land surface 12 in., weight 236.8 lbs./ft. Wall thickness or gauge No 214													
TYPE OF SCREEN OR PERFORATION MATERIAL:				7 PVC 10 Asbestos-cement									
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: 1/8				5 Gauzed wrapped 8 Saw cut 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 5 in. to 55 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.													
Screen-Perforated Intervals: From 0 ft. to 35 ft. to 55 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.													
Gravel Pack Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.													
5 GROUT MATERIAL:				3 Bentonite 4 Other									
1 Neat cement 2 Cement grout Grouted Intervals: From 0 ft. to 10 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 Oil well/Gas well													
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 _____ How many feet _____ ? Water Well Disinfected? Yes _____ No ✓													
Was a chemical/bacteriological sample submitted to Department? Yes _____ 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) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on June month 19 day 1980 year													
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 389													
This Water Well Record was completed on June month 3 day 1980 year under the business name of MYERS WATER WELL SERVICE by (signature) Rudolph Preiss													
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM		TO		LITHOLOGIC LOG		FROM		TO		LITHOLOGIC LOG	
		0		15		CLAY							
		15		25		SANDY CLAY							
		25		35		FINE SAND							
		35		55		GRAVEL							
NOT TO SCALE													
ELEVATION: _____													
Depth(s) Groundwater Encountered 1. _____ 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.													