

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <b>Ford</b>		<b>NE 1/4 NE 1/4 NE 1/4</b>	<b>16</b>	<b>T 27 S</b>	<b>R 23 E (W)</b>
Distance and direction from nearest town or city street address of well if located within city? <b>3 1/2 + 5 1/2 mi of Ford</b>					
2 WATER WELL OWNER: <b>Francis Ricke</b>					
RR#, St. Address, Box # : <b>Wright, Ks. 67882</b>				Board of Agriculture, Division of Water Resources	
City, State, ZIP Code :				Application Number:	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <b>400</b> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.			
		WELL'S STATIC WATER LEVEL <b>128</b> ft. below land surface measured on mo/day/yr <b>9-19-84</b>			
		Pump test data: Well water was .... ft. after .... hours pumping .... gpm			
		Est. Yield <b>40</b> gpm: Well water was .... ft. after .... hours pumping .... gpm			
		Bore Hole Diameter <b>12</b> in. to <b>400</b> ft., and .... in. to .... ft.			
		WELL WATER TO BE USED AS:			
		<input checked="" type="checkbox"/> 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			
		Was a chemical/bacteriological sample submitted to Department? Yes.....No <input checked="" type="checkbox"/> ; If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes <input checked="" type="checkbox"/> No			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped
<input checked="" type="checkbox"/> PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded
			7 Fiberglass		Threaded
Blank casing diameter <b>5</b> in. to <b>400</b> ft., Dia. .... in. to .... ft., Dia. .... in. to .... ft.					
Casing height above land surface <b>12</b> in., weight .... lbs./ft. Wall thickness or gauge No. <b>200</b> psi					
TYPE OF SCREEN OR PERFORATION MATERIAL: <input checked="" type="checkbox"/> PVC					
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	<input checked="" type="checkbox"/> 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 <b>295</b> ft. to <b>315</b> ft., From .... ft. to .... ft.					
From <b>360</b> ft. to <b>400</b> ft., From .... ft. to .... ft.					
GRAVEL PACK INTERVALS: From <b>17</b> ft. to <b>285</b> ft., From .... ft. to .... ft.					
From <b>295</b> ft. to <b>400</b> ft., From .... ft. to .... ft.					
6 GROUT MATERIAL: 1 Neat cement <input checked="" type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite 4 Other					
Grout intervals: From <b>7</b> ft. to <b>17</b> ft., From <b>285</b> ft. to <b>295</b> ft., From .... ft. to .... ft.					
What is the nearest source of possible contamination:					
<input checked="" type="checkbox"/> 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	
Direction from well?				How many feet? <b>100</b>	
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	top soil			
2	12	brown clay			
12	20	yellow shale			
20	160	black shale			
160	260	gray shale			
260	295	red & gray shale			
295	310	Dakota sandstone, medium clean			
310	330	gray shale			
330	340	Dakota sandstone, fine			
340	370	gray shale, sandstone streaks			
370	395	Dakota sandstone, medium clean			
395	400	gray shale, sandstone streaks			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>9-19-84</b> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <b>449</b> This Water Well Record was completed on (mo/day/yr) <b>9-24-84</b>					
under the business name of <b>Midwest Well &amp; Pump</b> by (signature) <i>Art Kuhlman</i>					
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.					