

1 LOCATION OF WATER WELL		Fraction <u>B 1/4 C</u>	Section Number <u>4</u>	Township Number <u>T 27 S</u>	Range Number <u>R 24 NW</u>
County: <u>Ford</u>		<u>SW 1/4 SE 1/4 NW 1/4</u>			
Distance and direction from nearest town or city? <u>1 Mi. East of Dodge City</u>			Street address of well if located within city? <u>11-12</u>		
2 WATER WELL OWNER: <u>MBPXL Corporation</u> <u>Ogallala #2</u>					
RR#, St. Address, Box #: <u>P. O. Box 1060</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code: <u>Dodge City, Kansas 67801</u>			Application Number:		
3 DEPTH OF COMPLETED WELL: <u>149</u> ft. Bore Hole Diameter: <u>5</u> in. to <u>149</u> ft., and _____ in. to _____ ft.					
Well Water to be used as:					
1 Domestic		3 Feedlot		5 Public water supply	
2 Irrigation		4 Industrial		8 Air conditioning	
		7 Lawn and garden only		9 Dewatering	
				11 Injection well	
				12 Other (Specify below)	
Well's static water level: <u>23.5</u> ft. below land surface measured on _____ month <u>5</u> day <u>80</u> year					
Pump Test Data: _____ 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:					
1 Steel <u>0-10'</u>		3 RMP (SR)		5 Wrought iron	
2 PVC <u>10'-109'</u>		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
				9 Other (specify below)	
				Casing Joints: Glued _____ Clamped _____	
				Welded _____	
				Threaded _____	
Blank casing dia _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. <u>154 Steel</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		8 RMP (SR)	
				11 Other (specify)	
				12 None used (open hole)	
Screen or Perforation Openings Are:					
1 Continuous slot		3 Mill slot		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
				7 Torch cut	
				8 Saw cut	
				9 Drilled holes	
				11 None (open hole)	
Screen-Perforation Dia _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Screen-Perforated Intervals: From <u>109</u> ft. to <u>149</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
Gravel Pack Intervals: From <u>50</u> ft. to <u>149</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
5 GROUT MATERIAL:					
1 Neat cement		2 Cement grout		3 Bentonite	
4 Other _____					
Grouted Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Cess pool		7 Sewage lagoon	
2 Sewer lines		5 Seepage pit		8 Feed yard	
3 Lateral lines		6 Pit privy		9 Livestock pens	
				10 Fuel storage	
				11 Fertilizer storage	
				15 Oil well/Gas well	
				12 Insecticide storage	
				16 Other (specify below)	
				<u>Waste Treatment</u>	
Direction from well <u>Northwest</u> How many feet <u>1600</u> ? Water Well Disinfected? Yes _____ No <u>X</u>					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No <u>X</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) constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month <u>29</u> day <u>80</u> year <u>4</u>					
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>102</u>					
This Water Well Record was completed on _____ month <u>30</u> day <u>1980</u> year under the business name of <u>Layne Western Company, Inc.</u> by (signature) <u>[Signature]</u>					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG	
		0 7 Top soil-Sandy			
		7 15 Med. sand			
		15 20 Med. gravel			
		20 30 Med. gravel w/clay			
		30 35 Clay			
		35 45 Med. sand w/clay			
		45 75 Brown clay			
		75 80 Med. gravel w/clay			
		80 100 Med. gravel			
		100 150 Coarse gravel			
ELEVATION: <u>150</u>		155 Shale			
Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)					

OFFICE USE ONLY

T

A

7

R

3

4

FM

SEC.

4

SW 1/4

SE 1/4

NW 1/4