

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: <u>Jard</u>		<u>C</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$	<u>22</u>	T <u>27</u> S	R <u>24</u> <u>2W</u>		
Distance and direction from nearest town or city? <u>1 1/2 S, 2W</u> <u>of Wilroads</u>			Street address of well if located within city?				
2 WATER WELL OWNER: <u>Slawson Drilling</u>							
RR#, St. Address, Box #: <u>Box 1131</u>			Board of Agriculture, Division of Water Resources				
City, State, ZIP Code: <u>Great Bend, KS 67530</u>			Application Number: <u>T80-641</u>				
3 DEPTH OF COMPLETED WELL: <u>150</u> ft. Bore Hole Diameter: <u>11</u> in. to <u>150</u> ft. and _____ in. to _____ ft.							
Well Water to be used as:							
1 Domestic		3 Feedlot	5 Public water supply	8 Air conditioning	11 Injection well		
2 Irrigation		4 Industrial	6 Oil field water supply	9 Dewatering	12 Other (Specify below)		
		7 Lawn and garden only	10 Observation well				
Well's static water level: <u>70</u> ft. below land surface measured on <u>1</u> month <u>5</u> day <u>81</u> year							
Pump Test Data: Well water was _____ ft. after _____ hours pumping. _____ gpm							
Est. Yield: <u>14</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm							
4 TYPE OF BLANK CASING USED:							
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile	Casing Joints: Glued <input checked="" type="checkbox"/> Clamped _____		
2 PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____		
			7 Fiberglass		Threaded _____		
Blank casing dia: <u>5</u> in. to <u>130</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.							
Casing height above land surface: <u>18</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>258</u>							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
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 Continuous slot		3 Mill slot	5 Gauzed wrapped	6 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-Perforation Dia: <u>5</u> in. to <u>150</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.							
Screen-Perforated Intervals: From <u>130</u> ft. to <u>150</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
Gravel Pack Intervals: From <u>10</u> ft. to <u>150</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
5 GROUT MATERIAL: <u>Neat cement</u> 2 Cement grout 3 Bentonite 4 Other							
Grouted Intervals: From <u>0</u> ft. to <u>70</u> 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	10 Fuel storage	14 Abandoned water well		
2 Sewer lines		5 Seepage pit	8 Feed yard	11 Fertilizer storage	15 Oil well/Gas well		
3 Lateral lines		6 Pit/privy	9 Livestock pens	12 Insecticide storage	16 Other (specify below)		
				13 Watertight sewer lines			
Direction from well: <u>West</u> How many feet: <u>80</u> ? Water Well Disinfected? Yes <u>HTH</u> No <input checked="" type="checkbox"/>							
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, date sample was submitted _____ month _____ day _____ year Pump Installed? Yes _____ No <input checked="" type="checkbox"/>							
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 _____ day _____ year							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>134</u>							
This Water Well Record was completed on _____ month _____ day _____ year under the business name of <u>Rosenkrantz - Bemis</u> by (signature) <u>Xora Dodson</u>							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	3	Top soil			
		3	12	Brown clay			
		12	32	Sandy clay			
		32	43	Hard brown clay			
		43	52	Sandy clay			
		52	132	Sand & gravel			
	132	133	Clay				
	133	150	good clean sand & gravel				
ELEVATION:							
Depth(s) Groundwater Encountered 1. <u>70</u> ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)							

OFFICE USE ONLY

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