

<b>LOCATION OF WATER WELL:</b>		<b>Fraction</b>	<b>Section Number</b>	<b>Township Number</b>	<b>Range Number</b>
County: <b>Ford</b>		JW ¼ NW ¼ NW ¼	24	T 27 S	R 25 E/W

Distance and direction from nearest town or city street address of well if located within city?  
**9¾ miles S Dodge City Ks**

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**WATER WELL OWNER:** **Mark Dirks**  
RR#, St. Address, Box # : **800 Clark**  
City, State, ZIP Code : **Dodge City, Ks 67801**

Board of Agriculture, Division of Water Resources  
Application Number:

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**LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:**

N			S
W	X - NW	-- NE --	E
	-- SW --	-- SE --	

**DEPTH OF COMPLETED WELL:** **170** ft. **ELEVATION:** \_\_\_\_\_  
Depth(s) Groundwater Encountered 1. **120** ft. 2. \_\_\_\_\_ ft. 3. \_\_\_\_\_ ft.  
**WELL'S STATIC WATER LEVEL** **110** ft. below land surface measured on mo/day/yr \_\_\_\_\_  
Pump test data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
Est. Yield \_\_\_\_\_ gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
Bore Hole Diameter **9"** in. to \_\_\_\_\_ ft., and \_\_\_\_\_ in. to \_\_\_\_\_ ft.

**WELL WATER TO BE USED AS:**    5 Public water supply    8 Air conditioning    11 Injection well  
☒ 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. ☒  
If yes, mo/day/yr sample was submitted \_\_\_\_\_  
Water Well Disinfected? Yes ☒ No

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**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="radio"/> 2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded
Blank casing diameter <b>5</b> in. to <b>140</b> ft., Dia	7 Fiberglass			Threaded.

Casing height above land surface **12** in., weight **250** lbs./ft. Wall thickness or gauge No. **250**

**TYPE OF SCREEN OR PERFORATION MATERIAL:**

1 Steel	3 Stainless steel	5 Fiberglass	<input checked="" type="radio"/> 7 PVC	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	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	<input checked="" type="radio"/> 8 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 **140** ft. to **170** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**GRAVEL PACK INTERVALS:** From **20** ft. to **170** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

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**GROUT MATERIAL:**    1 Neat cement    ☒ 2 Cement grout    3 Bentonite    4 Other \_\_\_\_\_  
Grout Intervals: From **0** ft. to **20** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**What is the nearest source of possible contamination:**

<input checked="" type="radio"/> 1 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? **South** How many feet? **100**

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FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	4	Soil			
4	120	Clay			
120-160		Gravel			

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**CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) **Aug 2, 1983** and this record is true to the best of my knowledge and belief. Kansas  
Water Well Contractor's License No. **111**. This Water Well Record was completed on (mo/day/yr) **8/21/83**  
Under the business name of **Craig Wells Plumbing** by (signature) *[Signature]*

**INSTRUCTIONS:** Use typewriter or ballpoint 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 66601. Send one to WATER WELL OWNER and retain one for your records.