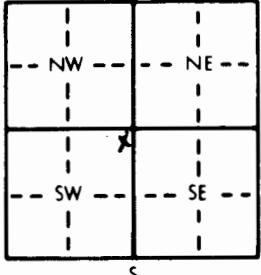


1 LOCATION OF WATER WELL:		Fraction <i>NE 1/4 NE 1/4 SW 1/4</i>	Section Number <i>18</i>	Township Number <i>T 27 S</i>	Range Number <i>R 28 E</i>		
Distance and direction from nearest town or city street address of well if located within city? <i>From east edge of Montezuma, 6 1/3 miles north, 1/2 mile east, 1/2 north</i>							
2 WATER WELL OWNER:		<i>Dennis Unruh</i>					
RR#, St. Address, Box #:		<i>Rt. 2 Montezuma, KS 67867</i>					
City, State, ZIP Code		Board of Agriculture, Division of Water Resources Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:							
4 DEPTH OF COMPLETED WELL:		ft. ELEVATION: <i>250'</i>					
Depth(s) Groundwater Encountered		ft. 2. <i>.....</i> ft. 3. <i>.....</i> ft.					
WELL'S STATIC WATER LEVEL		<i>115'</i> ft. below land surface measured on mo/day/yr <i>9-3-91</i>					
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 in. to		ft. and in. to ft.					
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 Monitoring well					
Was a chemical/bacteriological sample submitted to Department? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		If yes, mo/day/yr sample was submitted					
		Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>					
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped <input type="checkbox"/>					
1 Steel 3 RMP (SR)		Welded <input type="checkbox"/>					
2 PVC 4 ABS		Threaded <input type="checkbox"/>					
Blank casing diameter <i>5"</i> in. to <i>250'</i> ft., Dia <i>.....</i> in. to <i>.....</i> ft., Dia <i>.....</i> in. to <i>.....</i> ft.		lbs./ft. Wall thickness or gauge No. <i>SDR 21</i>					
Casing height above land surface <i>15'</i> in., weight <i>.....</i>							
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC 10 Asbestos-cement 11 Other (specify) <i>.....</i> 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 RMP (SR) 9 ABS					
1 Continuous slot 3 Mill slot		8 Saw cut <i>.....</i>					
2 Louvered shutter 4 Key punched		9 Drilled holes <i>.....</i>					
SCREEN-PERFORATED INTERVALS: From <i>200'</i> ft. to <i>220'</i> ft., From <i>230'</i> ft. to <i>250'</i> ft.		10 Other (specify) <i>.....</i>					
GRAVEL PACK INTERVALS: From <i>24'</i> ft. to <i>250'</i> ft., From <i>.....</i> ft. to <i>.....</i> ft., From <i>.....</i> ft. to <i>.....</i> ft.							
6 GROUT MATERIAL:		11 None (open hole)					
1 Neat cement 2 Cement grout		12 None used (open hole)					
Grout Intervals: From <i>4'</i> ft. to <i>24'</i> ft., From <i>.....</i> ft. to <i>.....</i> ft., From <i>.....</i> ft. to <i>.....</i> ft.		13 Insecticide storage <i>.....</i>					
What is the nearest source of possible contamination:							
1 Septic tank 4 Lateral lines		14 Abandoned water well					
2 Sewer lines 5 Cess pool		15 Oil well/Gas well					
3 Watertight sewer lines 6 Seepage pit		16 Other (specify below)					
10 Livestock pens							
11 Fuel storage							
12 Fertilizer storage							
13 Insecticide storage							
How many feet? <i>5'</i>							
Direction from well? <i>All around</i>							
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS	
<i>0</i>	<i>20</i>	<i>Sandy Topsoil</i>					
<i>20</i>	<i>40</i>	<i>Brown Sandy Clay</i>					
<i>40</i>	<i>60</i>	<i>" "</i>					
<i>60</i>	<i>80</i>	<i>Brown Clay + caliche layers</i>					
<i>80</i>	<i>100</i>	<i>Brown Clay fine to med. Sand</i>					
<i>100</i>	<i>120</i>	<i>" "</i>					
<i>120</i>	<i>140</i>	<i>Fine to med. Sand</i>					
<i>140</i>	<i>160</i>	<i>med. coarse sand</i>					
<i>160</i>	<i>180</i>	<i>Brown clay</i>					
<i>180</i>	<i>200</i>	<i>Fine sand clay mixed</i>					
<i>200</i>	<i>220</i>	<i>" "</i>					
<i>220</i>	<i>240</i>	<i>med. sand</i>					
<i>240</i>	<i>260</i>	<i>" "</i>					
		<i>Shale</i>					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> (1) constructed, <input type="checkbox"/> (2) reconstructed, or <input type="checkbox"/> (3) plugged under my jurisdiction and was completed on (mo/day/year) <i>9-3-91</i> and this record is true to the best of my knowledge and belief. Kansas							
Water Well Contractor's License No. <i>533</i> This Water Well Record was completed on (mo/day/yr) <i>10-8-91</i> by (signature) <i>EO J</i>							
under the business name of							
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, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.							