

| | | | | | | | | | |
|--|-----|---|-----|-----------------------------|---|-----------------------------|----------------|---|--|
| 1 LOCATION OF WATER WELL | | Fraction | | Section Number | | Township Number | | Range Number | |
| County: <u>Gray</u> | | <u>NW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ | | <u>15</u> | | <u>T</u> <u>27</u> <u>S</u> | | <u>R</u> <u>29</u> <u>E/W</u> | |
| Distance and direction from nearest town or city? <u>9 miles South and 2 miles West of Ingalls on blacktop road</u> | | | | | Street address of well if located within city? | | | | |
| 2 WATER WELL OWNER: <u>Cecil Flowers</u> (<u>Pendleton Drilling</u>) | | | | | | | | | |
| RR#, St. Address, Box # : | | | | | Board of Agriculture, Division of Water Resources | | | | |
| City, State, ZIP Code : <u>Ingalls, Kansas 67853</u> | | | | | Application Number: | | | | |
| 3 DEPTH OF COMPLETED WELL: <u>155</u> ft. Bore Hole Diameter <u>8</u> in. to 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>87</u> ft. below land surface measured on <u>May</u> month <u>3</u> day <u>1980</u> year | | | | | | | | | |
| Pump Test Data | | | | | | | | | |
| Est. Yield | | 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: <u>Glued</u> xxx <u>Clamped</u> | |
| 2 PVC | | 4 ABS | | 6 Asbestos-Cement | | 9 Other (specify below) | | Welded | |
| | | | | 7 Fiberglass | | | | Threaded | |
| Blank casing dia <u>5</u> in. to <u>155</u> ft., Dia in. to ft., Dia in. to ft. | | | | | | | | | |
| Casing height above land surface <u>12</u> in., weight lbs./ft. Wall thickness or gauge No <u>200</u> <u>Jess. & Lowe</u> | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | |
| 1 Steel | | 3 Stainless steel | | 5 Fiberglass | | 7 PVC | | 10 Asbestos-cement | |
| 2 Brass | | 4 Galvanized steel | | 6 Concrete tile | | 8 RMP (SR) | | 11 Other (specify) | |
| | | | | | | 9 ABS | | 12 None used (open hole) | |
| Screen or Perforation Openings Are: | | | | | | | | | |
| 1 Continuous slot | | 3 Mill slot | | 5 Gauzed wrapped | | 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-Perforation Dia <u>1/8</u> in. to ft., Dia in. to ft., Dia in. to ft. | | | | | | | | | |
| Screen-Perforated Intervals: | | | | | | | | | |
| From ft. to ft. | | From ft. to ft. | | From ft. to ft. | | From ft. to ft. | | From ft. to ft. | |
| From ft. to ft. | | From ft. to ft. | | From ft. to ft. | | From ft. to ft. | | From ft. to ft. | |
| Gravel Pack Intervals: | | | | | | | | | |
| From ft. to ft. | | From ft. to ft. | | From ft. to ft. | | From ft. to ft. | | From ft. to ft. | |
| From ft. to ft. | | From ft. to ft. | | From ft. to ft. | | From ft. to ft. | | From ft. to ft. | |
| 5 GROUT MATERIAL: | | | | | | | | | |
| 1 Neat cement | | 2 Cement grout | | 3 <u>Bentonite</u> | | 4 Other | | | |
| Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft., From ft. to ft., From ft. to ft. | | | | | | | | | |
| What is the nearest source of possible contamination: <u>None</u> | | | | | | | | | |
| 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 How many feet ? Water Well Disinfected? Yes <u>xxx</u> No | | | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes No <u>xxx</u> If yes, date sample was submitted month day year: Pump Installed? Yes No <u>xxx</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 <u>May</u> month <u>4</u> day <u>1980</u> year | | | | | | | | | |
| and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>179</u> | | | | | | | | | |
| This Water Well Record was completed on <u>Nov.</u> month <u>6</u> day <u>1980</u> year under the business name of <u>Joe's Well Service</u> / <u>Cimarron, Kansas</u> by (signature) <u>Lawrence Crick</u> | | | | | | | | | |
| 7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | | | | | | | | | |
| | | FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHOLOGIC LOG | | |
| | | 0 | 15 | Top soil & clay | | | | | |
| | | 15 | 45 | Clay & fine sand | | | | | |
| | | 45 | 60 | Clay & medium sand, clay | | | | | |
| | | 60 | 75 | Clay & coarse sand *3 ft.* | | | | | |
| | | 75 | 105 | Coarse sand | | | | | |
| | | 105 | 120 | Coarse sand & fine sand | | | | | |
| 120 | 150 | Coarse sand | | | | | | | |
| 150 | 165 | Coarse sand & clay | | | | | | | |
| ELEVATION: | | | | | | | | | |
| Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft. 4. ft. (Use a second sheet if needed) | | | | | | | | | |

OFFICE USE ONLY

T

27

R

29

END

SEC.

15

NW 1/4 NW 1/4 SW 1/4