

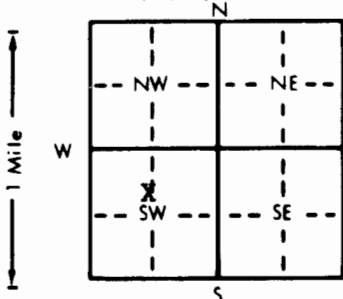
1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: GRAY		CS 1/4 N2 1/4 SW 1/4	18	T 27 S	R 29 E(W)

Distance and direction from nearest town or city street address of well if located within city?

From Montezuma - 5½ Miles SW on Hwy. 56, 8-¾ Miles N. & ¼ Mile E.

2	WATER WELL OWNER:	Paul Yost	
	RR#, St. Address, Box # :	Montezuma	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code :	Kansas 67867	Application Number: 20695 - 24236

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL: 300 ft. ELEVATION:



4 DEPTH OF COMPLETED WELL... 300 ... ft. ELEVATION: .....  
 Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL ... 108 ... 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... 30 ... in. to ... 300 ... 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 Observation well  
 Was a chemical/bacteriological sample submitted to Department? Yes.....No.....X....; If yes, mo/day/yr sample was sub-  
 mitted Water Well Disinfected? Yes No X

5 TYPE OF BLANK CASING USED:

① Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued . . . . . Clamped . . . . .
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded . . . . . <b>X</b>
		7 Fiberglass		Threaded . . . . .

Blank casing diameter . . . . . **18** . . . . in. to . . . . **150** . . . . ft., Dia . . . . **18** . . . . in. to . . . . **205** . . . . ft., Dia . . . . **18** . . . . in. to . . . . **250** . . . . ft.

Casing height above land surface . . . . . **20** . . . . in., weight . . . . **47.39** . . . . lbs./ft. Wall thickness or gauge No. . . . **250**

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-PERFORATED INTERVALS: From . . . . **150** . . . . ft. to . . . . **170** . . . . ft., From . . . . **205** . . . . ft. to . . . . **215** . . . . ft.

From . . . . **250** . . . . ft. to . . . . **300** . . . . ft., From . . . . . ft. to . . . . . ft.

GRAVEL PACK INTERVALS: From . . . . **20** . . . . ft. to . . . . **300** . . . . ft., From . . . . . ft. to . . . . . ft.

From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....  
 GROUT Intervals: From 0 ..... ft. to 20 ..... ft., From ..... ft. to ..... ft.  
 What is the nearest source of possible contamination:  
 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

[illegible]

7. CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 4-25-88 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 208 This Water Well Record was completed on (mo/day/yr) 5-25-88 under the business name of Minter-Wilson Drilling Co., Inc. by (signature) Nora Keller

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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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Paul Yost  
Gray Co.  
4-18-88

Location: SW 18-27-29  
Offset 100' North of old well  
Static water level 110-115

Test # 2

0	1	Top soil
1	10	Fine sand
10	18	Brown sandy clay
18	28	Fine sand
28	53	Brown sandy clay
53	157	Fine to medium sand & gravel
157	169	Fine to medium sand & gravel 10% clay
169	203	Brown sandy clay
203	213	Fine to medium sand and gravel
213	259	Brown sandy clay
259	284	Fine to medium sand & gravel 10% clay
284	290	Fine to medium sand and gravel
290	307	Brown sandy clay
307	322	Brown, Yellow clay
322	325	Shale