

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Gray</u>		<u>NW 1/4 SW 1/4 SW 1/4</u>	<u>28</u>	T <u>27</u> S	R <u>29</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>from west edge of Montezuma 4 3/4 miles north, 3 miles west 1/3 mile north.</u>					
2 WATER WELL OWNER: <u>Jesse Schmidt</u>					
RR#, St. Address, Box # : <u>Rt. 2</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Montezuma, KS. 67867</u>			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>240'</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>118'</u> ft. 2. <u>118'</u> ft. 3. <u>118'</u> ft.			
		WELL'S STATIC WATER LEVEL <u>118'</u> ft. below land surface measured on mo/day/yr <u>7-11-91</u>			
		Pump test data: Well water was <u>118'</u> ft. after <u>118'</u> hours pumping <u>118'</u> gpm			
		Est. Yield <u>118'</u> gpm: Well water was <u>118'</u> ft. after <u>118'</u> hours pumping <u>118'</u> gpm			
		Bore Hole Diameter <u>9 7/8"</u> in. to <u>240'</u> ft., and <u>240'</u> in. to <u>240'</u> 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 <u>X</u> No <u>X</u> ; If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes <u>X</u> No <u>X</u>			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
2 PVC		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
				8 Concrete tile	
				9 Other (specify below)	
				CASING JOINTS: Glued <u>X</u> Clamped <u>X</u>	
				Welded <u>X</u>	
				Threaded <u>X</u>	
Blank casing diameter <u>5"</u> in. to <u>210'</u> ft., Dia. <u>5"</u> in. to <u>210'</u> ft., Dia. <u>5"</u> in. to <u>210'</u> ft.					
Casing height above land surface <u>12"</u> in., weight <u>12"</u> lbs./ft. Wall thickness or gauge No. <u>SOR 21</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				7 PVC	
				8 RMP (SR)	
				9 ABS	
				10 Asbestos-cement	
				11 Other (specify)	
				12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		3 Mill slot		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
				7 Torch cut	
				8 Saw cut	
				9 Drilled holes	
				10 Other (specify)	
				11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From <u>210'</u> ft. to <u>240'</u> ft., From <u>210'</u> ft. to <u>240'</u> ft., From <u>210'</u> ft. to <u>240'</u> ft.					
GRAVEL PACK INTERVALS: From <u>25'</u> ft. to <u>240'</u> ft., From <u>25'</u> ft. to <u>240'</u> ft., From <u>25'</u> ft. to <u>240'</u> ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Intervals: From <u>4'</u> ft. to <u>24'</u> ft., From <u>4'</u> ft. to <u>24'</u> ft., From <u>4'</u> ft. to <u>24'</u> ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines		7 Pit privy	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below)	
Direction from well? <u>North</u> How many feet? <u>60'</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	20	Dark Topsoil - fine sand			
20	40	Fine sand			
40	60	Brown clay + sand mixed			
60	80	" " "			
80	100	Med. sand			
100	120	med. to coarse sand			
120	140	" " "			
140	160	Med. sand, brown clay layer, caliche			
160	180	Brown sandy clay + caliche			
180	200	med. sand clay layer			
200	220	" " "			
220	240	med. sand, yellow clay + rock layers, shale			
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) <u>7-11-91</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>533</u> This Water Well Record was completed on (mo/day/yr) <u>10-8-91</u> under the business name of <u>SO [signature]</u> by (signature)					
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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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