

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number				
County: <u>Gray</u>		<u>SE 1/4 SE 1/4 SE 1/4</u>	<u>10</u>	<u>T 27 S</u>	<u>R 30 EW</u>				
Distance and direction from nearest town or city street address of well if located within city? <u>15 M - SW of Eng ALLS KS, 1 KS,</u>									
2 WATER WELL OWNER: <u>Myrl E Frazier</u>									
RR#, St. Address, Box # <u>Box 65</u>				Board of Agriculture, Division of Water Resources					
City, State, ZIP Code <u>Eng ALLS KS 67853</u>				Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>999</u> ft. ELEVATION:							
<div style="text-align: center;">N 1 Mile W E S</div> <table border="1" style="margin: auto; text-align: center;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table>		NW	NE	SW	SE	Depth(s) Groundwater Encountered <u>1 999</u> ft. 2. ft. 3. ft.			
		NW	NE						
		SW	SE						
		WELL'S STATIC WATER LEVEL <u>999</u> 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 .in. to .ft. and .in. to .ft.		WELL WATER TO BE USED AS:							
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)		5 Public water supply 8 Air conditioning 11 Injection well							
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well									
Was a chemical/bacteriological sample submitted to Department? Yes No <u>X</u> If yes, mo/day/yr sample was submitted									
Water Well Disinfected? Yes No <u>X</u>									
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					
		7 Fiberglass		Threaded					
Blank casing diameter <u>5</u> in. to .ft., Dia .in. to .ft., Dia .in. to .ft.									
Casing height above land surface <u>60</u> in., weight lbs./ft. Wall thickness or gauge No.									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) <u>NA</u>		7 PVC 10 Asbestos-cement							
2 Brass 4 Galvanized steel 6 Concrete tile 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)		6 Wire wrapped 9 Drilled holes							
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) <u>NA</u>									
SCREEN-PERFORATED INTERVALS: 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.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other									
Grout Intervals: From <u>5</u> ft. to <u>0</u> ft., From .ft. to .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		11 Fuel storage 15 Oil well/Gas well							
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) <u>NONE</u>		13 Insecticide storage							
3 Watertight sewer lines 6 Seepage pit 9 Feedyard									
Direction from well? How many feet?									
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS				
		<u>Abandoned house well Dry Hole</u>	<u>999</u>	<u>5</u>	<u>GRAVEL</u>				
		<u>PLugged with</u>	<u>5</u>	<u>0</u>	<u>CEMENT</u>				
		<u>No 1 coarse gravel</u>							
		<u>LAST 5' with</u>							
		<u>Cement</u>							
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>6-1-91</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/yr) <u>6-1-91</u> under the business name of by (signature) <u>Don Denton</u>									
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.									