

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>Haskell</u>	<u>SE 1/4 SW 1/4 NE 1/4</u>	<u>26</u>	<u>T 27 S</u>	<u>R 31 EW</u>

Distance and direction from nearest town or city? 7 1/2 miles North, 2 west, 1 3/4 North 1/4 west of Copeland, Street address of well if located within city?

2 WATER WELL OWNER: Clyde Unruh
 RR#, St. Address, Box #: Route 2 Bkox 9 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Copeland, Kansas 67837 Application Number: 1207

3 DEPTH OF COMPLETED WELL: 255 ft. Bore Hole Diameter: 26 in. to 255 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: 140 ft. below land surface measured on June month 16 day 81 year
 Pump Test Data Not test: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield pumped gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

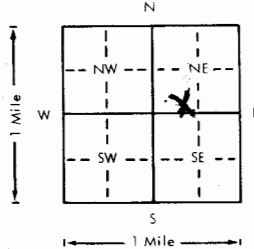
4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued _____ Clamped _____
 2 PVC 4 ABS 7 Fiberglass 9 Other (specify below) Welded X
 Threaded _____
 Blank casing dia 16 in. to 195 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight _____ lbs./ft. Wall thickness or gauge No. 219

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 11 Other (specify) _____
 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)
 2 Louvered shutter 4 Key punched 7 Torch cut 9 Drilled holes Bridge
 10 Other (specify) _____
 Screen-Perforation Dia: 16 in. to 60 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 195 ft. to 255 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 10 ft. to 255 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grouted Intervals: From 0 ft. to 10 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: None
 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 X No _____
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, date sample _____
 was submitted _____ month _____ day _____ year: Pump Installed? Yes X No _____
 If Yes: Pump Manufacturer's name Western Land Roller Model No. 1965 HP 70 Volts _____
 Depth of Pump Intake 190 ft. Pumps Capacity rated at 1200 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 June month 18th day 1981 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 223
 This Water Well Record was completed on June month 22 day 1981 year under the business name of Dunham Drilling Company by (signature) Karen Dunham

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	93	Topsoil & clay		
	93	150	Sand & little clay			
	150	250	Sand			
	250	255	Clay			
	255	258	Clay & lime (hard)			
	258	279	Clay & little lime			
	279	282	Sand			
	282	285	Clay			
	285	300	Clay & little lime			



ELEVATION: _____
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)
 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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY
T
R
S
E
W
S
E
W
1/4
N
E