

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Grant		$\frac{1}{4}$ NC $\frac{1}{4}$ SE $\frac{1}{4}$	4	T 27 S	R 35 E/W
Distance and direction from nearest town or city street address of well if located within city? 4 east, 11 north of Hickok					
2 WATER WELL OWNER: Charles Dew					
RR#, St. Address, Box # : PO Box 447			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Ulysses Ks 67880			Application Number: 21508		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 570 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1 270 ft. 2 _____ ft. 3 _____ ft.			
		WELL'S STATIC WATER LEVEL 270 ft. below land surface measured on mo/day/yr 215/06			
		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 26 in. to _____ ft. and _____ in. to _____ ft.			
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well					
1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)					
2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was submitted _____					
Water Well Disinfected? Yes X No _____					
5 TYPE OF BLANK CASING USED:					
1 <u>Steel</u>		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 X
			7 Fiberglass		Threaded _____
Blank casing diameter 16 in. to 570 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface 12 in., weight _____ lbs./ft. Wall thickness or gauge No. .250					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 <u>Steel</u>		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 <u>Louvered shutter</u>		4 Key punched	6 Wire wrapped	9 Drilled holes	
			7 Torch cut	10 Other (specify)	
SCREEN-PERFORATED INTERVALS: From 290 ft. to 330 ft. From 370 ft. to 410 ft.					
From 450 ft. to 510 ft. From 550 ft. to 570 ft.					
GRAVEL PACK INTERVALS: From 20 ft. to 570 ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other _____					
Grout Intervals From 0 ft. to 20 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 <u>Abandoned water well</u>
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)
Direction from well? south		How many feet? 290			
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
0	20		Top soil & fine sand	480	495
20	60		Fine sand & a little clay	495	500
60	100		Sand med to course	500	516
100	140		Large gravel & sand	516	518
140	160		Sandy clay	518	540
160	255		Sand & gravel	540	560
255	280		Brown clay some sand	560	570
280	340		Fine to course sand & a little cl.		
340	360		Fine to med sand dirty		
360	390		Fine to med sand & caliche		
390	420		Caliche & a little sand & clay		
420	452		Sandy clay & fine sand		
452	465		Sand med to course		
465	480		Sandy clay		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was _____					
completed on (mo/day/yr) 2/15/06 and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. 473 This Water Well Record was completed on (mo/day/yr) 2/17/06					
under the business name of Tyler water Well Inc. by (signature) _____					
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send 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.					

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