

1 LOCATION OF WATER WELL:		Fraction <u>SW 1/4 SW 1/4 SE 1/4</u>		Section Number <u>4</u>		Township Number <u>T 27 S</u>		Range Number <u>R 36 EW</u>	
County: <u>GRANT</u>									
Distance and direction from nearest town or city street address of well if located within city? <u>From Ulysses 9N-52E</u>									
2 WATER WELL OWNER: <u>Leslie Walker Trust</u>									
RR#, St. Address, Box # : <u>R+1 130x23</u>									
City, State, ZIP Code : <u>Ulysses KS 67880</u>									
Board of Agriculture, Division of Water Resources									
Application Number:									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>471</u> ft. ELEVATION:							
		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.							
		WELL'S STATIC WATER LEVEL ..... ft. below land surface measured on mo/day/yr							
		Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm							
		Est. Yield <u>50</u> gpm: Well water was ..... ft. after ..... hours pumping ..... gpm							
		Bore Hole Diameter <u>9 7/8</u> in. to <u>4 7/8</u> 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	
		2 Irrigation		4 Industrial		7 Lawn and garden only		10 Observation 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 <u>X</u> No									
5 TYPE OF BLANK CASING USED:									
1 Steel		3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below)		CASING JOINTS: Glued <u>X</u> Clamped	
2 PVC		4 ABS		7 Fiberglass				Welded	
								Threaded	
Blank casing diameter <u>5</u> in. to <u>3 7/8</u> ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.									
Casing height above land surface <u>12</u> in., weight ..... lbs./ft. Wall thickness or gauge No. <u>SA 40</u>									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel		3 Stainless steel		5 Fiberglass		8 RMP (SR)		10 Asbestos-cement	
2 Brass		4 Galvanized steel		6 Concrete tile		9 ABS		11 Other (specify)	
								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 <u>370</u> ft. to <u>470</u> ft., From ..... ft. to ..... ft.									
GRAVEL PACK INTERVALS: From <u>-20</u> ft. to <u>471</u> ft., From ..... ft. to ..... ft.									
6 GROUT MATERIAL:									
1 Neat cement		2 Cement grout		3 Bentonite		4 Other			
Grout Intervals: From <u>0</u> ft. to <u>20</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	
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? <u>North West</u>									
FROM		TO		LITHOLOGIC LOG		FROM		TO	
<u>0</u>		<u>205</u>		<u>Sandy clay small strips of sand</u>					
<u>205</u>		<u>470</u>		<u>Consolidated sand w/ sand lenses</u>					
<u>470</u>		<u>471</u>		<u>DAKOTA SAND</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>Oct 20 87</u> and this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's License No. <u>300</u> This Water Well Record was completed on (mo/day/yr) <u>Oct 20 87</u>									
under the business name of <u>Julia Shultz</u> by (signature) <u>Julia Shultz</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 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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