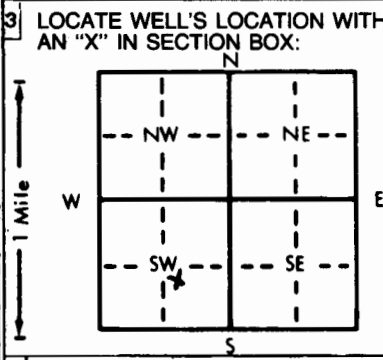


1 LOCATION OF WATER WELL: County: **Grant** Fraction: **NW 1/4 SE 1/4 SW 1/4** Section Number: **14** Township Number: **T 27 S** Range Number: **R 38 EW**

Distance and direction from nearest town or city street address of well if located within city?  
**7 miles north, 5 west, 1 1/4 miles north of 4-way stop at Ulysses, Ks.**

2 WATER WELL OWNER: **Ralph Rider**  
 RR#, St. Address, Box #: **900 N. Wilson, Ulysses, KS. 67880**  
 City, State, ZIP Code: **Ulysses, KS. 67880**  
 Board of Agriculture, Division of Water Resources  
 Application Number: **7379**



4 DEPTH OF COMPLETED WELL... **432.1** ft. ELEVATION: **slope**

Depth(s) Groundwater Encountered 1. **210** ft. 2. \_\_\_\_\_ ft. 3. \_\_\_\_\_ ft.

WELL'S STATIC WATER LEVEL **210** ft. below land surface measured on **mo/day/yr 12-31-81**

Pump test data: Well water was **267.3** ft. after **21.8** hours pumping **1176** gpm

Est. Yield **1250** gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

Bore Hole Diameter: **26** in. to **432.1** 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
2 Irrigation	4 Industrial	7 Lawn and garden only
		10 Observation well

9 Dewatering  
 12 Other (Specify below)

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 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 <b>X</b>
		7 Fiberglass		Threaded _____

Blank casing diameter **16** in. to **252.1** ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.

Casing height above land surface **18** in., weight **36.85** lbs./ft. Wall thickness or gauge No. **219**

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	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 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From **252.1** ft. to **432.1** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From **10** ft. to **432.1** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other \_\_\_\_\_

Grout intervals: From **0** ft. to **10** 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? **northeast** How many feet? **approx. 240**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Surface			
2	60	Fine sand w/clay strips			
60	180	Clay			
180	205	Clay w/lime shells			
205	215	Fine to coarse sand			
215	245	Clay w/fine sand strips			
245	282	Fine to medium sand strips			
282	330	Clay & sandy clay w/fine sand strips			
330	360	Yellow chalk, sandstone and sandrock			
360	380	Clay			
380	425	Clay and sandstone			
425	460	Clay and sandstone			

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) **Jan. 6, 1982** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **164**. This Water Well Record was completed on (mo/day/yr) **June 30, 1982** under the business name of **Houck Bros. Drilling Co.** by (signature) *Mollie Beard*

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, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY  
T 27  
R 38  
EW  
SEC. 14  
M 14  
S 14  
S 14