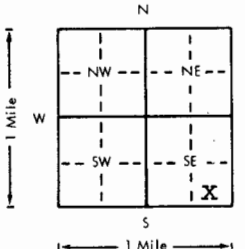


1 LOCATION OF WATER WELL		Fraction	Section Number		Township Number	Range Number
County: <u>Pratt</u> <u>Kingman</u>		C 1/4 SE 1/4 SE 1/4	17		T 28 S	R 10W E/W
Distance and direction from nearest town or city? <u>3 S, 1/4 W of Cunningham, Kansas</u>			Street address of well if located within city?			
2 WATER WELL OWNER:		Blue Goose Drilling				
RR#, St. Address, Box # :		North McKinley				
City, State, ZIP Code :		Great Bend, Kansas 67530				
		Board of Agriculture, Division of Water Resources Application Number: <u>Unknown</u>				
3 DEPTH OF COMPLETED WELL		140 ft. Bore Hole Diameter . . . 8 in. to 140 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 12 Other (Specify below)				
2 Irrigation 4 Industrial		7 Lawn and garden only 10 Observation well				
Well's static water level . . . 35 ft. below land surface measured on . . . 3 month 12 day 1981 year						
Pump Test Data : Well water was . . . ft. after . . . hours pumping . . . gpm						
Est. Yield 60 gpm: Well water was . . . ft. after . . . hours pumping . . . gpm						
4 TYPE OF BLANK CASING USED:		5 Wrought iron 8 Concrete tile Casing Joints: <u>Glued</u> . . . Clamped . . .				
1 Steel 3 RMP (SR)		6 Asbestos-Cement 9 Other (specify below) Welded . . .				
2 PVC 4 ABS		7 Fiberglass . . . Threaded . . .				
Blank casing dia . . . 5 in. to 120 ft., Dia . . . 12 in. to . . . ft., Dia . . . in. to . . . ft.						
Casing height above land surface . . . 12 in., weight . . . 2.8 lbs./ft. Wall thickness or gauge No . . . Sch. 40						
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC 10 Asbestos-cement				
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) . . .						
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)						
Screen or Perforation Openings Are:		5 Gauzed wrapped 8 Saw cut 11 None (open hole)				
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes						
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) . . .						
Screen-Perforation Dia . . . 5 in. to . . . ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.						
Screen-Perforated Intervals: From . . . 120 ft. to . . . 140 ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.						
Gravel Pack Intervals: From . . . 10 ft. to . . . 140 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:		10 Fuel storage 14 Abandoned water well				
1 Septic tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 15 Oil well/Gas well						
2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 16 Other (specify below)						
3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines						
Direction from well . . . East . . . How many feet . . . 60 ? Water Well Disinfected? Yes . . . No						
Was a chemical/bacteriological sample submitted to Department? Yes . . . No . . . If yes, date sample						
was submitted . . . month . . . day . . . year: Pump Installed? Yes . . . No						
If Yes: Pump Manufacturer's name . . . Model No. . . HP . . . Volts . . .						
Depth of Pump Intake . . . ft. Pumps Capacity rated at . . . 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 . . . 3 month 12 day 1981 year						
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . . 186						
This Water Well Record was completed on . . . April . . . month . . . 24 day 1981 year under the business						
name of <u>Kellys Water Well Service</u> by (signature) <u>Kelly Price</u>						
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:						
						
ELEVATION: <u>Unknown</u>						
Depth(s) Groundwater Encountered 1. . . 35 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.						