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1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>Lea</u>	<u>SW 1/4 SW 1/4 NE 1/4</u>	<u>3</u>	<u>T 28 S</u>	<u>R 11 E</u>

Distance and direction from nearest town or city: Cunningham, KS  
5 mi West 1/2 South  
Street address of well if located within city?

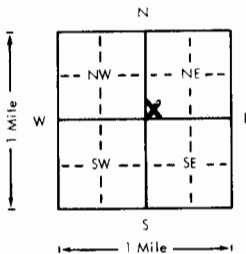
2 WATER WELL OWNER: <u>Steeling Delq. Co.</u>	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #: <u>Box 129</u>	Application Number:
City, State, ZIP Code: <u>Steeling, Kansas 67579</u>	

3 DEPTH OF COMPLETED WELL: <u>140</u> ft. Bore Hole Diameter: <u>5</u> in. to <u>140</u> 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: <u>50</u> ft. below land surface measured on <u>December</u> month <u>14</u> day <u>1979</u> year	
Pump Test Data: <u>None</u> Well water was ... ft. after ... hours pumping ... gpm	
Est. Yield gpm: Well water was ... ft. after ... hours pumping ... gpm	

4 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	Casing Joints: Glued <u>XXX</u> Clamped
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
2 PVC	4 ABS	7 Fiberglass	10 Observation well
Blank casing dia: <u>5</u> in. to <u>140</u> ft., Dia ... in. to ... ft., Dia ... in. to ... ft.			
Casing height above land surface: <u>12</u> in., weight <u>273.3</u> lbs./ft. Wall thickness or gauge No. <u>265</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:	7 PVC	10 Asbestos-cement	
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
Screen or Perforation Openings Are: <u>1/8</u>	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot	3 Drill slot	6 Wire wrapped	9 Drilled holes
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify)
Screen-Perforation Dia: <u>5</u> in. to <u>140</u> ft., Dia ... in. to <u>120</u> ft., Dia ... in. to ... ft.			
Screen-Perforated Intervals: From <u>140</u> ft. to <u>120</u> ft., From ... ft. to ... ft., From ... ft. to ... ft.			
Gravel Pack Intervals: From <u>140</u> ft. to <u>110</u> 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 <u>0</u> ft. to <u>110</u> ft., From ... ft. to ... ft., From ... ft. to ... ft.				
What is the nearest source of possible contamination: <u>None</u>	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 ... How many feet ... ?				
Water Well Disinfected? Yes ... No <u>✓</u>				
Was a chemical/bacteriological sample submitted to Department? Yes ... No <u>✓</u>				
If Yes, date sample was submitted ... month ... day ... year				
Pump Installed? Yes ... No <u>✓</u>				
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 <u>December</u> month <u>14</u> day <u>1979</u> year	
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>143</u>	
This Water Well Record was completed on <u>December</u> month <u>12</u> day <u>1979</u> year under the business name of <u>Myer Water Well Serv.</u> by (signature) <u>Glenn Rosemahl</u>	

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	4	Soil			
	4	55	Dry Gravel			
	55	60	Clay			
	60	90	Sandy - Fine			
	90	110	Clay			
	110	140	Gravel			
ELEVATION:						

Depth(s) Groundwater Encountered 1. ... ft. 2. ... ft. 3. ... ft. 4. ... ft.	(Use a second sheet if needed)
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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.