

1 LOCATION OF WATER WELL:		Fraction	Section Number		Township Number	Range Number
County: <u>Pratt</u>		<u>NW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$	<u>28</u>		<u>T 28</u> <u>S</u>	<u>R 11</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>4 South 1 1/2 East of Cairo</u>						
2 WATER WELL OWNER: <u>Wayne Dudrey</u>						
RR#, St. Address, Box # : <u>Route 1</u>				Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Stafford, Ks. 67578</u>				Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>120</u> ft. ELEVATION: <u>flat</u>				
		Depth(s) Groundwater Encountered <u>60</u> ft. 2. <u>60</u> ft. 3. <u>60</u> ft.				
		WELL'S STATIC WATER LEVEL <u>60</u> ft. below land surface measured on mo/day/yr				
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm				
		Est. Yield <u>125</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm				
		Bore Hole Diameter: <u>1.0</u> in. to <u>1.20</u> ft., and _____ in. to _____ ft.				
		WELL WATER TO BE USED AS:				
		5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic <u>X</u> 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				
		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>XX</u> No _____				
5 TYPE OF BLANK CASING USED:						
1 Steel		3 RMP (SR)		5 Wrought iron		8 Concrete tile
2 PVC <u>XX</u>		4 ABS		6 Asbestos-Cement		9 Other (specify below)
				7 Fiberglass		CASING JOINTS: Glued <u>XX</u> Clamped _____
						Welded _____
						Threaded _____
Blank casing diameter <u>5</u> in. to <u>11.0</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.						
Casing height above land surface <u>14</u> in., weight <u>16.0</u> lbs./ft. Wall thickness or gauge No. <u>SDR 26</u>						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel		3 Stainless steel		5 Fiberglass		7 PVC <u>X</u>
2 Brass		4 Galvanized steel		6 Concrete tile		8 RMP (SR)
						9 ABS
						10 Asbestos-cement
						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 <u>X</u>
2 Louvered shutter		4 Key punched		6 Wire wrapped		9 Drilled holes
				7 Torch cut		10 Other (specify) _____
						11 None (open hole)
SCREEN-PERFORATED INTERVALS: From <u>110</u> ft. to <u>120</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From <u>85</u> ft. to <u>120</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
6 GROUT MATERIAL: 1 Neat cement <u>X</u> 2 Cement grout 3 Bentonite 4 Other _____						
Grout Intervals: From <u>5</u> ft. to <u>15</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
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage
						13 Insecticide storage
						14 Abandoned water well
						15 Oil well/Gas well
						16 Other (specify below)
						no Source
Direction from well? <u>none</u>				How many feet? <u>none</u>		
FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHOLOGIC LOG
0	4	earth				
4	15	gyp clay				
15	33	gyp clay & fine sand				
33	45	fine brown sandy clay				
45	60	fine brown sand				
60	73	fine sand				
73	98	brown sandy clay				
98	108	fine sand				
108	120	coarse sand & gravel				
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>7-22-81</u> and this record is true to the best of my knowledge and belief. Kansas						
Water Well Contractor's License No. <u>103</u> This Water Well Record was completed on (mo/day/year) <u>8-31-81</u>						
under the business name of <u>Hank Bruse Water Well Service</u> by (signature) <u>Hank Bruse</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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.						