

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Pratt</u>		<u>NE 1/4 NE 1/4 SE 1/4</u>	<u>21</u>	T <u>28</u> S	R <u>14</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>225 22 E. Cullison Kansas</u>					
2 WATER WELL OWNER: <u>John Meyers</u>					
RR#, St. Address, Box # : City, State, ZIP Code				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>120</u> ft. ELEVATION:	
				Depth(s) Groundwater Encountered 1. <u>83</u> ft. 2. ft. 3. ft.	
				WELL'S STATIC WATER LEVEL <u>83</u> ft. below land surface measured on mo/day/yr <u>5-13-83</u>	
				Pump test data: Well water was <u>83</u> ft. after <u>1</u> hours pumping <u>5</u> gpm	
				Est. Yield <u>15</u> gpm; Well water was ft. after hours pumping gpm	
Bore Hole Diameter <u>8 3/4</u> in. to ft., and in. to ft.				WELL WATER TO BE USED AS:	
<input checked="" type="radio"/> 1 Domestic <input type="radio"/> 3 Feedlot <input type="radio"/> 6 Oil field water supply <input type="radio"/> 9 Dewatering <input type="radio"/> 12 Other (Specify below)				<input type="radio"/> 5 Public water supply <input type="radio"/> 8 Air conditioning <input type="radio"/> 11 Injection well	
<input type="radio"/> 2 Irrigation <input type="radio"/> 4 Industrial <input type="radio"/> 7 Lawn and garden only <input type="radio"/> 10 Observation well					
Was a chemical/bacteriological sample submitted to Department? Yes <u>X</u> 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		<input checked="" type="radio"/> 3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded	
Blank casing diameter <u>5</u> in. to <u>100</u> ft., Dia		7 Fiberglass		Threaded	
Casing height above land surface <u>12</u> in., weight					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel	3 Stainless steel	5 Fiberglass	<input checked="" type="radio"/> 8 RMP (SR)	10 Asbestos-cement	
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	11 Other (specify)	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot	3 Mill slot	5 Gauzed wrapped	<input checked="" type="radio"/> 8 Saw cut	11 None (open hole)	
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes		
SCREEN-PERFORATED INTERVALS: From <u>100</u> ft. to <u>120</u> ft., From ft. to ft.					
GRAVEL PACK INTERVALS: From <u>85</u> ft. to <u>120</u> ft., From ft. to ft.					
6 GROUT MATERIAL: <input checked="" type="radio"/> 1 Neat cement <input type="radio"/> 2 Cement grout <input type="radio"/> 3 Bentonite <input type="radio"/> 4 Other					
Grout Intervals: From <u>4</u> ft. to <u>14</u> ft., From ft. to ft., From ft. to ft.					
What is the nearest source of possible contamination:					
<input checked="" type="radio"/> 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)	
Direction from well? <u>W</u> How many feet? <u>75</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
<u>0</u>	<u>1</u>	<u>Silt & Sand</u>			
<u>1</u>	<u>3</u>	<u>Sand</u>			
<u>3</u>	<u>8</u>	<u>Sandy Clay</u>			
<u>8</u>	<u>22</u>	<u>Sand</u>			
<u>22</u>	<u>30</u>	<u>Gray Clay</u>			
<u>30</u>	<u>42</u>	<u>Tan Clay</u>			
<u>42</u>	<u>120</u>	<u>Sand</u>			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, <u>(2)</u> reconstructed, or <u>(3)</u> plugged under my jurisdiction and was completed on (mo/day/year) <u>5-13-83</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>224</u> This Water Well Record was completed on (mo/day/yr) <u>7-20-83</u> under the business name of <u>Carl Hays Water Well Serv.</u> by (signature) <u>Carl Hays</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.					

OFFICE USE ONLY

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R

14

EW

SEC.

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NE 1/4 NE 1/4 SE 1/4