

1 LOCATION OF WATER WELL:		Fraction EAST	Section Number	Township Number	Range Number
County: Pratt		NC 1/4 SIDE 1/4 NW 1/4	24	T 28 S	R 15 <b>EW</b>
Distance and direction from nearest town or city street address of well if located within city? Approximately 2 1/4 miles south and 1/2 mile west of Cullison					
2 WATER WELL OWNER:		Robert Brehm			
RR#, St. Address, Box # :		10044 SE 40th Street			
City, State, ZIP Code :		Pratt, KS 67124			
		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: 213 ft. ELEVATION: Unknown			
		Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft.			
		WELL'S STATIC WATER LEVEL 91.0 ft. below land surface measured on mo/day/yr 1-24-97			
		Pump test data: Well water was not ch'd. ft. after . . . . . hours pumping . . . . . gpm			
		Est. Yield unknown gpm: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm			
		Bore Hole Diameter 6 3/4 in. to 220 . . . . . 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 Monitoring well Observation Well			
		Was a chemical/bacteriological sample submitted to Department? Yes. . . . . No. <b>X</b> . . . . . If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes . . . . . No <b>X</b> . . . . .			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued . <b>X</b> . . . . . Clamped . . . . .			
1 Steel 3 RMP (SR)		6 Asbestos-Cement 9 Other (specify below) Welded . . . . .			
2 PVC 4 ABS		7 Fiberglass . . . . . Threaded . . . . .			
Blank casing diameter 3 . . . . . in. to 201 . . . . . ft. Dia 3 . . . . . in. to 211 . . . . . ft. Dia . . . . . in. to . . . . . ft.					
Casing height above land surface 24 . . . . . in., weight 1.96 . . . . . lbs./ft. Wall thickness or gauge No. 300 . . . . .					
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-PERFORATED INTERVALS: From 201 . . . . . ft. to 206 . . . . . ft. From . . . . . ft. to . . . . . ft. From . . . . . ft. to . . . . . ft.					
GRAVEL PACK INTERVALS: From 195 . . . . . ft. to 215 . . . . . ft. From . . . . . ft. to . . . . . ft. From . . . . . ft. to . . . . . ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Bentonite Holeplug					
Grout Intervals: From 0 . . . . . ft. to 188 . . . . . ft. From . . . . . ft. to . . . . . ft. From 188 . . . . . ft. to 195 . . . . . ft.					
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well			
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well					
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage None known					
Direction from well?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	Topsoil	219	220	Shale, red, hard
5	11	Clay, brown, soft, sandy			
11	18	Clay, brown, hard			
18	22	Clay, white, hard			
22	68	Clay, brown, hard			
68	97	Sand and gravel, medium and fine			
97	106	Clay, brown, hard			
106	114	Clay, brownish-orange, soft, sandy			
114	149	Sand and gravel, medium and fine, clean			
149	150	Clay, tan, hard			
150	206	Sand and gravel, coarse, medium, fine			
206	219	Clay, red, hard, sandy			
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) 1-24-97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/yr) 2-10-97 under the business name of Clarke Well & Equipment, Inc. by (signature) <i>Clarke W. Clark</i>					
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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

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