

[1] LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedwick</u>		<u>SE ¼ SE ¼ SE ¼</u>	<u>27</u>	<u>T 28 S</u>	R <u>2 W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>½ WEST & 5 NORTH OF CLEARWATER KANSAS</u>					
[2] WATER WELL OWNER: <u>AUTHOR STRUNK</u>					
RR#, St. Address, Box # : <u>RR#1</u>					
City, State, ZIP Code : <u>VIOHA KANSAS 67149</u>					
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>56</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>17</u> ft. 2. <u>56</u> ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>20</u> ft. below land surface measured on mo/day/yr <u>7/17/82</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter..... <u>8</u> in. to <u>56</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)			
		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>X</u> No			
[5] TYPE OF BLANK CASING USED:					
Blank casing diameter <u>5</u> in. to <u>46</u> ft., Dia in. to ft., Dia in. to ft.					
Casing height above land surface <u>32</u> in., weight <u>236.8</u> lbs./ft. Wall thickness or gauge No. <u>214</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
SCREEN OR PERFORATION OPENINGS ARE:					
GRAVEL PACK INTERVALS: From <u>14</u> ft. to <u>56</u> ft., From ft. to ft.					
[6] GROUT MATERIAL:					
Grout Intervals: From <u>3</u> ft. to <u>13</u> ft., From ft. to ft., From ft. to ft.					
What is the nearest source of possible contamination:					
Direction from well? <u>SOUTH WEST</u> How many feet? <u>150</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
<u>0</u>	<u>3</u>	<u>Top soil</u>			
<u>3</u>	<u>14</u>	<u>CLAY</u>			
<u>14</u>	<u>17</u>	<u>sand</u>			
<u>17</u>	<u>56</u>	<u>SHALE</u>			
[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>7/12/82</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>402</u> . This Water Well Record was completed on (mo/day/yr) <u>7/17/82</u> under the business name of <u>Mrs MILLAN WATER WELL</u> by (signature) <u>Glenne E McMillan</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.					