

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>FORD</u>		<u>SW 1/4 SW 1/4 SE 1/4</u>	<u>20</u>	T <u>28</u> S	R <u>21</u> EW
Distance and direction from nearest town or city? <u>2nd &amp; Bucklin Kansas</u>			Street address of well if located within city?		
2 WATER WELL OWNER: <u>MRS. Ralph TRAGER</u>					
RR#, St. Address, Box # : <u>Bucklin Kansas</u>					
City, State, ZIP Code : _____					
Board of Agriculture, Division of Water Resources Application Number: _____					
3 DEPTH OF COMPLETED WELL. <u>120</u> ft. Bore Hole Diameter. <u>8-3/4</u> in. to <u>120</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>87</u> ft. below land surface measured on _____ month _____ day _____ year					
Pump Test Data : Well water was <u>87</u> ft. after _____ hours pumping _____ gpm					
Est. Yield <u>25</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm					
4 TYPE OF BLANK CASING USED:					
1 Steel		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 _____
			7 Fiberglass		Threaded _____
Blank casing dia <u>5</u> in. to <u>100</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface <u>12</u> in., weight <u>1.75</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	8 RMP (SR)	10 Asbestos-cement
2 Brass		4 Galvanized steel	6 Concrete tile	9 ABS	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	11 None (open hole)
2 Louvered shutter		4 Key punched	6 Wire wrapped	9 Drilled holes	
			7 Torch cut	10 Other (specify)	
Screen-Perforation Dia <u>5</u> in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Screen-Perforated Intervals: From <u>100</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.					
5 GROUT MATERIAL:					
1 Neat cement		2 Cement grout	3 Bentonite	4 Other	
Grouted 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:					
1 Septic tank		4 Cess pool	7 Sewage lagoon	10 Fuel storage	14 Abandoned water well
2 Sewer lines		5 Seepage pit	8 Feed yard	11 Fertilizer storage	15 Oil well/Gas well
3 Lateral lines		6 Pit privy	9 Livestock pens	12 Insecticide storage	16 Other (specify below)
Direction from well <u>SW</u> How many feet <u>125</u> ? Water Well Disinfected? Yes <u>X</u> No _____					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, date sample was submitted _____ month _____ day _____ year					
If Yes: Pump Manufacturer's name <u>Flint &amp; Walling</u> Model No. <u>10BA15</u> HP _____ Volts <u>22</u>					
Depth of Pump Intake <u>105</u> ft. Pumps Capacity rated at <u>10</u> 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 _____ month _____ day _____ year					
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 _____ month _____ day _____ year under the business name of <u>Carl Haysse Water Well Serv</u> by (signature) <u>Carl Haysse</u>					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG	
		0 2 Top Soil			
		2 82 Tan Clay			
		82 120 GRAVEL			
ELEVATION: _____					
Depth(s) Groundwater Encountered 1. <u>87</u> ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)					

OFFICE USE ONLY

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