

1 LOCATION OF WATER WELL: County: <u>Stanton</u>		Fraction <u>SE 1/4 NW 1/4 SW 1/4</u>		Section Number <u>24</u>	Township Number <u>T 28 S</u>	Range Number <u>R 40</u>
Distance and direction from nearest town or city street address of well if located within city? <u>Turn off at Big Bow on Hwy 160 west, 4 west, 1 north, 1 west, 1/4 north and east</u>						
2 WATER WELL OWNER: RR# , St. Address, Box # : City, State, ZIP Code :		<u>O. W. Josserand</u> <u>RR</u> <u>Johnson, KS 67855</u> Board of Agriculture, Division of Water Resources Application Number: <u>18,645</u>				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>614'</u> ft. ELEVATION: _____ ft.				
<div style="text-align: center;"><p>1 Mile</p></div>		Depth(s) Groundwater Encountered 1. <u>255'</u> ft. 2. _____ ft. 3. _____ ft.				
		WELL'S STATIC WATER LEVEL <u>255'</u> ft. below land surface measured on mo/day/yr <u>7-2-84</u>				
		Pump test data: Well water was <u>340'</u> ft. after <u>1</u> hours pumping <u>743</u> gpm				
		Est. Yield <u>1000</u> gpm: Well water was <u>385'</u> ft. after <u>2</u> hours pumping <u>976</u> gpm				
		Bore Hole Diameter <u>24</u> in. to <u>614</u> ft., and _____ in. to _____ ft.				
		WELL WATER TO BE USED AS:				
		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 Observation well				
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was submitted _____				
5 TYPE OF BLANK CASING USED:		Water Well Disinfected? Yes _____ No <u>X</u>				
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____		2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____				
Blank casing diameter <u>.16</u> in. to <u>614</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		7 Fiberglass _____ Threaded _____				
Casing height above land surface <u>12</u> in., weight <u>42.05</u> lbs./ft. Wall thickness or gauge No. <u>.250</u>						
TYPE OF SCREEN OR PERFORATION MATERIAL:		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:		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-PERFORATED INTERVALS:		From <u>309</u> ft. to <u>348</u> ft., From <u>358</u> ft. to <u>417</u> ft.				
GRAVEL PACK INTERVALS:		From <u>348</u> ft. to <u>358</u> ft., From <u>417</u> ft. to <u>614</u> ft.				
		From <u>10</u> ft. to <u>614</u> ft., From _____ ft. to _____ ft.				
		From _____ ft. to _____ ft., From _____ ft. to _____ ft.				
6 GROUT MATERIAL:		1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____				
Grout Intervals: From <u>0</u> ft. to <u>10</u> ft., From _____ ft. to _____ 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 Observed						
Direction from well?		How many feet?				
FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHOLOGIC LOG
		See Attached Log				
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>7-9-84</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>145</u> This Water Well Record was completed on (mo/day/yr) <u>7-20-84</u> under the business name of <u>Henkle Drilling & Supply Co., Inc.</u> by (signature) <u>Bruce R. Henkle</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.						

DRILLERS TEST LOG

CUSTOMERS NAME O. W. Josserand DATE 5-17-84
STREET ADDRESS _____ TEST # 6 E. LOG yes
CITY & STATE Johnson, KS 67855 DRILLER Livingston
COUNTY Stanton QUARTER SW SECTION 24 TOWNSHIP 28 RANGE 40
LOCATION 100 ft. NE of old well

[illegible]

GARDEN CITY, KS
Phone 277-2389

HENKLE DRILLING & SUPPLY CO., INC
IRRIGATION HEADQUARTERS

SUBLETTE, KS
Phone 675-8221