

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number			
County: <u>Kingman</u>		SE ¼ SW ¼ SW ¼		3		T 28 S		R 8 NW			
Distance and direction from nearest town or city street address of well if located within city? <u>3½ Miles west 1 mile south of Kingman, Kans.</u>											
2 WATER WELL OWNER:		Doug Kletke									
RR#, St. Address, Box # :		RT# 1									
City, State, ZIP Code :		Kingman, Kans. 67068									
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>31'</u> ft. 2. _____ ft. 3. _____ ft.									
		WELL'S STATIC WATER LEVEL <u>28'</u> ft. below land surface measured on mo/day/yr <u>June 2 - 94</u>									
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm									
		Est. Yield <u>30</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm									
		Bore Hole Diameter <u>7/8"</u> in. to <u>56'</u> ft. and _____ in. to _____ ft.									
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well									
		<input checked="" type="checkbox"/> 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 _____									
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted											
Water Well Disinfected? Yes <input checked="" type="checkbox"/> No											
5 TYPE OF BLANK CASING USED:											
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____											
<input checked="" type="checkbox"/> PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____											
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>16"</u> in. weight <u>160</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) _____											
SCREEN OR PERFORATION OPENINGS ARE:											
1 Continuous slot 3 Mill slot 5 Gauzed wrapped <input checked="" type="checkbox"/> 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>56'</u> ft. to <u>46'</u> ft. From _____ ft. to _____ ft.											
GRAVEL PACK INTERVALS: From <u>56'</u> ft. to <u>41'</u> ft. From _____ ft. to _____ ft.											
From <u>37'</u> ft. to <u>21'</u> ft. From _____ ft. to _____ ft.											
6 GROUT MATERIAL:											
1 Neat cement 2 Cement grout <input checked="" type="checkbox"/> 3 Bentonite 4 Other _____											
Grout Intervals: From <u>41'</u> ft. to <u>37'</u> ft. From <u>21'</u> ft. to <u>4'</u> ft. From _____ ft. to _____ ft.											
What is the nearest source of possible contamination:											
<input checked="" type="checkbox"/> 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 _____											
Direction from well? <u>West</u> How many feet? <u>200'</u>											
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS	
0'		4'		Top Soil.		Cemented to top.					
4'		11'		Brown Clay.							
11'		16'		White Clay		4 sacks hole plug.					
16'		21'		Ropy White Clay.							
21'		33'		Fine White sand.							
33'		41'		Clay.		3 sacks hole plug.					
41'		56'		Course sand & Fine gravel.							
				Red Bed							
				Cement Plug in bottom of Casing.							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>May 29 - 94</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>112</u> This Water Well Record was completed on (mo/day/yr) <u>June 14 - 94</u> under the business name of <u>Wells Drilling Co.</u> by (signature) <u>Wells</u>											