

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <u>Kingman</u>		<u>NE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$		<u>32</u>		<u>T</u> <u>28</u> <u>S</u>		<u>R</u> <u>9</u> <u>EW</u>	
Distance and direction from nearest town or city street address of well if located within city? <u>6 south, 6 east, 1/2 north, 330' west of Cunningham, Kansas</u>									
2 WATER WELL OWNER: <u>F W A Drilling Company</u> RR#, St. Address, Box #: <u>Box 850980</u> City, State, ZIP Code: <u>Yukon, Oklahoma 73085-0980</u> Lease: <u>Klausmeyer # 1</u> Application Number: _____ Board of Agriculture, Division of Water Resources									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:				4 DEPTH OF COMPLETED WELL: <u>95</u> ft. ELEVATION: _____					
<p>1 Mile</p>				Depth(s) Groundwater Encountered <u>1</u> <u>48</u> ft. <u>2</u> _____ ft. <u>3</u> _____ ft.					
				WELL'S STATIC WATER LEVEL <u>48</u> ft. below land surface measured on mo/day/yr <u>30 Nov. 84</u>					
				Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm					
				Est. Yield <u>80</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm					
				Bore Hole Diameter <u>10</u> in. to <u>95</u> 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 <u>6</u> 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 _____									
Water Well Disinfected? Yes <u>X</u> No _____									
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <u>X</u> Clamped _____									
<u>2</u> PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____									
7 Fiberglass _____ Threaded _____									
Blank casing diameter <u>5</u> in. to <u>70</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Casing height above land surface <u>12</u> in., weight <u>2.34</u> lbs./ft. Wall thickness or gauge No. <u>214</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 <u>8</u> 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>70</u> ft. to <u>95</u> ft., From _____ ft. to _____ ft.									
From _____ ft. to _____ ft., From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From <u>10</u> ft. to <u>95</u> ft., From _____ ft. to _____ ft.									
From _____ ft. to _____ ft., From _____ ft. to _____ ft.									
6 GROUT MATERIAL: 1 Neat cement <u>2</u> Cement grout 3 Bentonite 4 Other _____									
Grout Intervals: From <u>0</u> ft. to <u>10</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.									
What is the nearest source of possible contamination:									
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well									
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well									
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)									
13 Insecticide storage <u>None</u>									
Direction from well? _____ How many feet? _____									
FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG									
0 2 01 Soil, top									
2 22 05 Sand, med and fine									
22 35 01 Clay, tan									
35 40 07 Sand, fine									
40 45 23 Sand, cemented									
45 50 05 Sand, fine to med									
50 55 01 Clay, tan									
55 95 17 Sand, <del>fine</del> med to coarse and fine to med gravel									
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>3 Dec. 84</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>325</u> This Water Well Record was completed on (mo/day/yr) <u>30 Jan. 85</u> under the business name of <u>Central Well &amp; Pump Inc.</u> by (signature) <u>[Signature]</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.									