

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Keymon</u>		<u>NW 1/4 1/4</u>	<u>1</u>	T <u>29</u> S	R <u>10</u> E <u>(W)</u>
Distance and direction from nearest town or city street address of well if located within city? <u>6 miles South 3 miles East of Cunningham Kon</u>					
2 WATER WELL OWNER: <u>Calvin Eck</u>					
RR#, St. Address, Box #:				Board of Agriculture, Division of Water Resources	
City, State, ZIP Code: <u>Topeka 1 Cunningham Kansas 67035</u>				Application Number:	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>75</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>60</u> ft. below land surface measured on mo/day/yr <u>10-10-83</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>12</u> in. to <u>75</u> ft., and in. to ft.			
		WELL WATER TO BE USED AS:			
		<input checked="" type="checkbox"/> 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)			
		<input type="checkbox"/> 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation 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	
<input checked="" type="checkbox"/> 2 PVC		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
Blank casing diameter <u>5</u> in. to <u>75</u> ft., Dia				8 Concrete tile	
Casing height above land surface <u>2 feet</u> in., weight				9 Other (specify below)	
TYPE OF SCREEN OR PERFORATION MATERIAL:				CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped	
1 Steel		3 Stainless steel		5 Asbestos-cement	
2 Brass		4 Galvanized steel		6 Concrete tile	
				7 PVC	
SCREEN OR PERFORATION OPENINGS ARE:				8 RMP (SR)	
<input checked="" type="checkbox"/> 1 Continuous slot		3 Mill slot		9 ABS	
2 Louvered shutter		4 Key punched		10 Asbestos-cement	
				11 Other (specify)	
				12 None used (open hole)	
				8 Saw cut	
				11 None (open hole)	
				9 Drilled holes	
				10 Other (specify)	
SCREEN-PERFORATED INTERVALS:		From <u>55</u> ft. to <u>75</u> ft., From		ft. to	
		From		ft. to	
GRAVEL PACK INTERVALS:		From <u>10</u> ft. to <u>75</u> ft., From		ft. to	
		From		ft. to	
6 GROUT MATERIAL:					
1 Neat cement		2 Cement grout		3 Bentonite	
4 Other					
Grout Intervals: From <u>1</u> ft. to <u>10</u> ft., From				ft. to	
What is the nearest source of possible contamination:				10 Livestock pens	
<input checked="" type="checkbox"/> 1 Septic tank		4 Lateral lines		11 Fuel storage	
2 Sewer lines		5 Cess pool		12 Fertilizer storage	
3 Watertight sewer lines		6 Seepage pit		13 Insecticide storage	
		7 Pit privy		14 Abandoned water well	
		8 Sewage lagoon		15 Oil well/Gas well	
		9 Feedyard		16 Other (specify below)	
Direction from well? <u>West</u>				How many feet? <u>100</u>	
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		<u>Top Soil</u>			
<u>10</u>	<u>10</u>	<u>Clay</u>			
<u>20</u>	<u>20</u>	<u>Sand fine</u>			
<u>30</u>	<u>30</u>	<u>Sand and clay</u>			
<u>40</u>	<u>40</u>	<u>Sand, Brown</u>			
<u>50</u>	<u>50</u>	<u>Sand fine</u>			
<u>60</u>	<u>60</u>	<u>Sand coarse</u>			
<u>70</u>	<u>70</u>	<u>Sand coarse</u>			
<u>75</u>		<u>Sand</u>			
		<u>Total Depth of well</u>			
		<u>75 feet</u>			
		<u>Clay Bottom</u>			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) <u>10-10-83</u> 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 (mo/day/yr) <u>10-10-83</u> under the business name of <u>Weber Well Service</u> by (signature) <u>Leon A. Weber</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.					