

1 LOCATION OF WATER WELL: County: Pratt		Fraction SE ¼ SW ¼ NE ¼		Section Number 30	Township Number T 29 S	Range Number R 11 E/W																																																																														
Distance and direction from nearest town or city street address of well if located within city? Approximately 1½ miles north and ¼ mile west of Isabel																																																																																				
2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :		Kenneth Blackwelder 90037 SE 90th Ave. Isabel, KS 67065 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: 204 ft. ELEVATION: unknown																																																																																		
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL 77.6 ft. below land surface measured on mo/day/yr 12-11-98 Pump test data: Well water was not ch'd ft. after hours pumping gpm Est. Yield unknown gpm: Well water was ft. after hours pumping gpm Bore Hole Diameter 6 3/4 in. to 206 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 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well Observation Well Was a chemical/bacteriological sample submitted to Department? Yes No X ; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes No X																																																																																		
		5 TYPE OF BLANK CASING USED:																																																																																		
		1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded 7 Fiberglass Threaded Blank casing diameter 3 in. to 197 ft., Dia. in. to ft., Dia. in. to ft. Casing height above land surface 24 in., weight 1.96 lbs./ft. Wall thickness or gauge No. 300																																																																																		
		TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 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: 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 197 ft. to 202 ft., From ft. to ft. From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 190 ft. to 206 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 Bentonite Holeplug																																																																																				
Grout Intervals: From 0 ft. to 184 ft., From ft. to ft., From 184 ft. to 190 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 None known Direction from well? How many feet?																																																																																				
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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) 12/11/98 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/yr) 12/28/98 under the business name of Clarke Well & Equipment, Inc. by (signature) <i>Charles W. Clarke</i>																																																																																				
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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.																																																																																				

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