

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Pratt</u>		<u>NC 1/4 N 1/2 1/4 SE 1/4 1/4</u>	<u>23</u>	<u>T 29 S</u>	<u>R 11 E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>4 East 2 1/2 North of Isabel Kansas</u>					
2 WATER WELL OWNER: <u>Charles Viethaler</u>					
RR#, St. Address, Box # : <u>Route 1 Box 62</u>				Board of Agriculture, Division of Water Resources	
City, State, ZIP Code : <u>Isabel Kansas 67865</u>				Application Number:	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>80</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>38</u> ft. below land surface measured on mo/day/yr <u>4 3 92</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>20</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>12</u> in. to <u>80</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    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)		8 Concrete tile	
2 PVC		4 ABS		9 Other (specify below)	
Blank casing diameter <u>5</u> in. to <u>60</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		5 Wrought iron		CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____	
Casing height above land surface <u>2</u> in., weight _____ lbs./ft. Wall thickness or gauge No. _____		6 Asbestos-Cement		Welded _____	
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 Fiberglass		Threaded _____	
1 Steel		3 Stainless steel		10 Asbestos-cement	
2 Brass		4 Galvanized steel		11 Other (specify) _____	
3 Fiberglass		5 Gauzed wrapped		12 None used (open hole)	
4 Key punched		6 Wire wrapped			
SCREEN OR PERFORATION OPENINGS ARE:		7 Torch cut		8 Saw cut	
1 Continuous slot		8 RMP (SR)		11 None (open hole)	
2 Louvered shutter		9 ABS		9 Drilled holes	
3 Mill slot		10 Other (specify) _____			
4 Key punched					
SCREEN-PERFORATED INTERVALS:		From <u>60</u> ft. to <u>80</u> ft., From _____ ft. to _____ ft.			
		From _____ ft. to _____ ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS:		From <u>10</u> ft. to <u>70</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>1</u> ft. to <u>10</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:		10 Livestock pens		14 Abandoned water well	
1 Septic tank		11 Fuel storage		15 Oil well/Gas well	
2 Sewer lines		12 Fertilizer storage		16 Other (specify below)	
3 Watertight sewer lines		13 Insecticide storage			
4 Lateral lines					
5 Cess pool					
6 Seepage pit					
7 Pit privy					
8 Sewage lagoon					
9 Feedyard					
Direction from well?		How many feet? <u>100</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	<u>Top Soil</u>			
1	10	<u>Sand</u>			
10	20	<u>Sand Fine</u>			
20	30	<u>Clay Brown</u>			
30	40	<u>Clay and Sand</u>			
40	50	<u>Sand</u>			
50	60	<u>Sand</u>			
60	70	<u>Sand coarse</u>			
70	80	<u>Coarse gravel</u>			
		<u>80 feet</u>			
		<u>Total Depth of well</u>			
		<u>Clay bottom</u>			
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>4 3 92</u> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <u>226</u> This Water Well Record was completed on (mo/day/yr) _____					
under the business name of <u>Weber Well Service</u> by (signature) <u>Leon A Weber</u>					