

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number			
County: Pratt		NE ¼ NE ¼ NE ¼		33		T 29 S		R 11 W E/W			
Distance and direction from nearest town or city street address of well if located within city?											
1 N 1½ E Isabel											
2 WATER WELL OWNER: Calvin Boyd											
RR#, St. Address, Box # : Medicine Lodge, Ks. 67104					Board of Agriculture, Division of Water Resources						
City, State, ZIP Code :					Application Number:						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL: 102 ft. ELEVATION:								
			Depth(s) Groundwater Encountered 1. 70 ft. 2. 70 ft. 3. 70 ft.								
			WELL'S STATIC WATER LEVEL 70 ft. below land surface measured on mo/day/yr 11-12-93								
			Pump test data: Well water was 70 ft. after 11 hours pumping 11 gpm								
			Est. Yield 25 gpm: Well water was 70 ft. after 11 hours pumping 11 gpm								
			Bore Hole Diameter 9 in. to 102 ft., and 102 in. to 102 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 ; If yes, mo/day/yr sample was submitted								
			Water Well Disinfected? Yes No								
5 TYPE OF BLANK CASING USED:											
1 Steel			3 RMP (SR)			5 Wrought iron			8 Concrete tile		
2 PVC			4 ABS			6 Asbestos-Cement			9 Other (specify below)		
						7 Fiberglass			CASING JOINTS: Glued Clamped		
									Welded Threaded		
Blank casing diameter 5 in. to 80 ft., Dia 5 in. to 90 ft., Dia 5 in. to 102 ft., Dia 5 in. to 102 ft.											
Casing height above land surface 17 in., weight 210 lbs./ft. Wall thickness or gauge No. 210											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
1 Steel			3 Stainless steel			5 Fiberglass			7 PVC		
2 Brass			4 Galvanized steel			6 Concrete tile			8 RMP (SR)		
									9 ABS		
									10 Asbestos-cement		
									11 Other (specify)		
									12 None used (open hole)		
SCREEN OR PERFORATION OPENINGS ARE:											
1 Continuous slot			3 Mill slot			5 Gauzed wrapped			7 Saw cut		
2 Louvered shutter			4 Key punched			6 Wire wrapped			9 Drilled holes		
						7 Torch cut			10 Other (specify)		
SCREEN-PERFORATED INTERVALS: From 80 ft. to 90 ft., From 80 ft. to 90 ft., From 80 ft. to 90 ft., From 80 ft. to 90 ft.											
GRAVEL PACK INTERVALS: From 23 ft. to 102 ft., From 23 ft. to 102 ft., From 23 ft. to 102 ft., From 23 ft. to 102 ft.											
6 GROUT MATERIAL:											
1 Neat cement			2 Cement grout			3 Bentonite			4 Other		
Grout Intervals: From 3 ft. to 23 ft., From 3 ft. to 23 ft., From 3 ft. to 23 ft., From 3 ft. to 23 ft.											
What is the nearest source of possible contamination:											
1 Septic tank			4 Lateral lines			7 Pit privy			10 Livestock pens		
2 Sewer lines			5 Cess pool			8 Sewage lagoon			11 Fuel storage		
3 Watertight sewer lines			6 Seepage pit			9 Feedyard			12 Fertilizer storage		
									13 Insecticide storage		
									14 Abandoned water well		
									15 Oil well/Gas well		
									16 Other (specify below)		
Direction from well? noeth											
How many feet? 500											
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS	
0		2		soil							
2		9		sand & clay							
9		13		fine dirty sand							
13		24		brown clay							
24		60		white clay							
60		70		fine dirty sand							
70		90		clean sand, some med							
90		102		med cemented sand							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) <u>reconstructed</u> , or (3) <u>plugged</u> under my jurisdiction and was completed on (mo/day/year) 11-12-93 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 140 This Water Well Record was completed on (mo/day/yr) 12-12-93 under the business name of Lyman Inc. by (signature) <i>Clayton Lyman</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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