

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Pratt</u>		$\frac{1}{4}$ N/C $\frac{1}{4}$ SE $\frac{1}{4}$	<u>7</u>	T <u>29</u> S	R <u>13</u> EW
Distance and direction from nearest town or city street address of well if located within city? <u>2$\frac{1}{2}$ east, 1$\frac{1}{2}$ north of Coats, Ks.</u>					
2 WATER WELL OWNER: <u>Rocky Fox</u>		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box #: <u>20305 SW 60th St.</u>		Application Number: <u>42113</u>			
City, State, ZIP Code: <u>Pratt, Ks. 67124</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>234</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>97.1</u> ft. below land surface measured on mo/day/yr <u>9-5-97</u>			
		Pump test data: Well water was ft. after hours pumping gpm			
		Est. Yield <u>1100</u> gpm: Well water was <u>144</u> ft. after <u>4</u> hours pumping <u>1100</u> gpm			
		Bore Hole Diameter <u>28</u> in. to <u>234</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)			
		<u>2 Irrigation</u> 4 Industrial 7 Lawn and garden only 10 Monitoring 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 <u>X</u>			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <u>X</u> Clamped			
1 Steel 3 RMP (SR)		5 Wrought iron 8 Concrete tile			
2 PVC 4 ABS		6 Asbestos-Cement 9 Other (specify below)			
		7 Fiberglass			
		Welded			
		Threaded			
Blank casing diameter <u>16</u> in. to <u>144</u> ft. Dia. <u>16</u> in. to <u>174</u> to <u>214</u> ft. Dia. in. to ft.					
Casing height above land surface <u>12</u> in., weight <u>SDR 32.5</u> lbs./ft. Wall thickness or gauge No.					
TYPE OF SCREEN OR PERFORATION MATERIAL:		<u>7</u> 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 <u>144</u> ft. to <u>174</u> ft. From <u>214</u> ft. to <u>234</u> ft.					
GRAVEL PACK INTERVALS: From <u>234</u> ft. to <u>20</u> ft. From ft. to ft.					
6 GROUT MATERIAL: 1 <u>Neat cement</u> 2 Cement grout 3 Bentonite 4 Other					
Grout Intervals: From <u>20</u> ft. to <u>0</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 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well					
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage					
Direction from well?		How many feet? <u>none</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top soil			
3	51	Brown clay			
51	60	Sand and gravel			
60	76	Sand and gravel medium coarse			
76	85	Brown clay			
85	98	Sand and gravel medium coarse			
98	106	Brown clay			
106	115	Sand and gravel fine to medium			
115	135	Gravel coarse			
135	170	Sand and gravel medium coarse			
170	175	Sand and gravel little clay			
175	212	Brown clay			
212	233	Sand and gravel clean, coarse & loose			
233	234	Red bed			
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) <u>9-16-97</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>134</u> This Water Well Record was completed on (mo/day/yr) <u>9-17-97</u> under the business name of <u>Rosencrantz-Bemis</u> by (signature) <u>Fredia Rodson</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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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