

1 LOCATION OF WATER WELL: County: Pratt		Fraction $S\frac{1}{2}$ $\frac{1}{4}$ $N\frac{1}{2}$ $\frac{1}{4}$ SW $\frac{1}{4}$	Section Number 12	Township Number T 29 S	Range Number R 14 E
Distance and direction from nearest town or city street address of well if located within city? <u>1$\frac{1}{4}$ north-3/4 east of Coats, Ks.</u>					
2 WATER WELL OWNER: RR#, St. Address, Box # : Allen Drilling City, State, ZIP Code : G reat Bend, Ks. 67530		Board of Agriculture, Division of Water Resources Application Number: T86-114			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL.....137..... ft. ELEVATION:			
<p>The diagram shows a square representing one section of land, divided by dashed lines into four smaller squares labeled NW, NE, SE, and SW. A large 'X' is drawn over the SW quadrant, indicating where the water well was located. To the left of the diagram is a vertical scale bar labeled '1 Mile'. Below the diagram are labels 'N' at the top, 'S' at the bottom, 'W' on the left, and 'E' on the right.</p>		Depth(s) Groundwater Encountered 1.....ft. 2.....ft. 3.....ft. Well's Static Water Level90... ft. below land surface measured on mo/day/yr2-25-86 Pump test data: Well water was ft. after hours pumping gpm Est. Yield ... m³/gm: Well water was ft. after hours pumping gpm Bore Hole Diameter .10....in. to137.....ft., and.....in. to			
		WELL WATER TO BE USED AS: 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)			
		Was a chemical/bacteriological sample submitted to Department? Yes.....No.X.....; If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes hth No			
5 TYPE OF BLANK CASING USED:					
Blank casing diameter10.....in. to137.....ft., Dia.....in. toft., Dia.....in. toft.					
Casing height above land surface18.....in., weightlbs./ft. Wall thickness or gauge No.258.....					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
SCREEN OR PERFORATION OPENINGS ARE:					
SCREEN-PERFORATED INTERVALS: From.....117.....ft. to137.....ft., From.....ft. to.....ft.					
GRAVEL PACK INTERVALS: From.....10.....ft. to137.....ft., From.....ft. to.....ft.					
6 GROUT MATERIAL:					
Grout Intervals: From.....0.....ft. to10.....ft., From.....ft. to.....ft., From.....ft. to.....ft.					
What is the nearest source of possible contamination:					
Direction from well? North west t How many feet? 90					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	5	Top soil			
5	41	Tan sandy clay & white broken rock			
41	70	Medium sand			
70	83	Tan s andy clay & white broken rock			
83	145	Sand and gravel with tan sandy clay			
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)2-25-86..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No.134..... This Water Well Record was completed on (mo/day/yr)3-17-86..... under the business name of Rosencrantz-Bemis by (signature) Fredia Nelson					
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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.					