

HEINZ A-1

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>KIOWA</u>	<u>C 1/4 SE 1/4 NW 1/4</u>	<u>14</u>	T <u>29</u> S	R <u>19</u> EW

Distance and direction from nearest town or city? GREENSBURG 1/2 S 3 W 4 S 3/4 W SOUTH SIDE
 Street address of well if located within city?

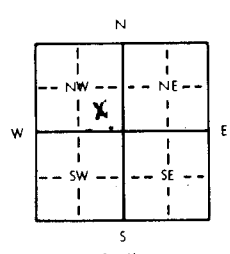
2 WATER WELL OWNER: D.R. LAUER OIL CO INC.
 RR#, St. Address, Box #: 221 S. BROADWAY SUITE 400
 City, State, ZIP Code: WICHITA KS 67202
 Board of Agriculture, Division of Water Resources
 Application Number:

3 DEPTH OF COMPLETED WELL: 175 ft. Bore Hole Diameter: 9 in. to 175 ft., and _____ in. to _____ ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 6 Oil field water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 7 Lawn and garden only 9 Dewatering 12 Other (Specify below)
 10 Observation well
 Well's static water level: 150 ft. below land surface measured on Feb month 27 day 1981 year
 Pump Test Data NONE: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
 2 PVC 4 ABS 7 Fiberglass _____ Threaded _____
 5 Wrought iron 8 Concrete tile Casing Joints: Glue X Clamped _____
 Blank casing dia: 5 in. to 155 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface: 19 in., weight 26.5 lbs./ft. Wall thickness or gauge No. 214
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 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: 1/8 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-Perforation Dia: 5 in. to 175 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 155 ft. to 175 ft. From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 145 ft. to 175 ft. From _____ ft. to _____ ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grouted Intervals: From 0 ft. to 10 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: NONE
 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)
 13 Watertight sewer lines
 Direction from well _____ How many feet _____ ? Water Well Disinfected? Yes _____ No
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No If yes, date sample _____
 was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No
 If Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____
 Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ gal./min.
 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other _____

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on Feb month 27 day 1981 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 389
 This Water Well Record was completed on Mar month 6 day 1981 year under the business name of MYERS WATER WELL SERVICE INC by (signature) Rudolph Pearson

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		TO		LITHOLOGIC LOG	FROM		TO		LITHOLOGIC LOG
		<u>0</u>	<u>45</u>	<u>45</u>	<u>75</u>	<u>SANDY CLAY</u>				
	<u>45</u>	<u>75</u>	<u>75</u>	<u>125</u>	<u>FINE SAND</u>					
	<u>75</u>	<u>125</u>	<u>125</u>	<u>175</u>	<u>CLAY</u>					
	<u>125</u>	<u>175</u>	<u>175</u>	<u>175</u>	<u>GRAVEL</u>					

ELEVATION: _____
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)

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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY
 T
 R
 SEC
 89
 19
 14
 C
 SE 1/4
 NW 1/4

X