

1 LOCATION OF WATER WELL:		Fraction	Section		Township Number	Range Number
County:	Ford	NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$	20		T 29 S	R 21 E/W

Distance and direction from nearest town or city street address of well if located within city?

2 1/2 South of Bucklin Kansas

2	WATER WELL OWNER:	Oscar Scheib		
	RR#, St. Address, Box # :	Bucklin Knasas	PLUGGING OF OLD WELL	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code :			Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

1 Mile

W

E

S

N

NW	NE
SW	SE

S

4 DEPTH OF COMPLETED WELL 180 ft. ELEVATION: _____

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 111 ft. below land surface measured on mo/day/yr 2-9-87

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter _____ in. to _____ 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
2 Irrigation	4 Industrial	9 Dewatering
	7 Lawn and garden only	10 Observation well
		12 Other (Specify below) <u>Cattle</u>

Was a chemical/bacteriological sample submitted to Department? Yes _____ No X; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes XX No _____

5 TYPE OF BLANK CASING USED:		5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued Clamped	
<input checked="" type="checkbox"/> Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded	
2 PVC	4 ABS	7 Fiberglass		Threaded. <input checked="" type="checkbox"/>	
Blank casing diameter 4 in. to 170 ft., Dia in. to ft., Dia in. to ft.					
Casing height above land surface 8' below in., weight lbs./ft. Wall thickness or gauge No.					
TYPE OF SCREEN OR PERFORATION MATERIAL:			7 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	<input checked="" type="checkbox"/> 7 Torch cut	10 Other (specify)		
SCREEN-PERFORATED INTERVALS:			From ft. to ft., From ft. to ft.		
			From ft. to ft., From ft. to ft.		
GRAVEL PACK INTERVALS:			From ft. to ft., From ft. to ft.		
			From ft. to ft., From ft. to ft.		

5] GROUT MATERIAL: 1 Neat cement 2 Cement grout ~~3~~ Bentonite 4 Other
Grout Intervals: From... 6 ... ft. to ... 170 ... ft. From ... ft. to ... ft. From ... ft. to ... ft.
What is the nearest source of possible contamination:
1 Septic tank 4 Lateral lines 7 Pit privy ~~10~~ Livestock pens 14 Abandoned water well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
13 Insecticide storage
Direction from well? NE How many feet? 70

[illegible]

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) 2/9/87 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 224 This Water Well Record was completed on (mo/day/yr) 3/16/87 under the business name of Carl Hays Water Well Service by (signature) Carl Hays

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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.