

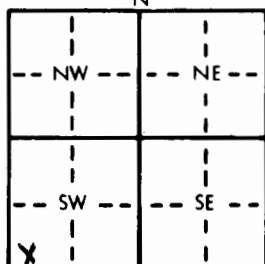
LOCATION OF WATER WELL: County: <b>Ford</b>	Fraction SW $\frac{1}{4}$ SW $\frac{1}{4}$ SW $\frac{1}{4}$	Section Number <b>19</b>	Township Number T <b>29</b> S	Range Number R <b>24</b> E/W
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Distance and direction from nearest town or city street address of well if located within city?

**16 south of Dodge City**

WATER WELL OWNER: <b>Mr. Ford</b>	<b>Pickrell Drilling</b>	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # :	<b>Litwin Bldg-Suite 205</b>	Application Number: <b>T81-942</b>
City, State, ZIP Code	<b>Minneola, Ks. Wichita, Ks. 67202</b>	

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



DEPTH OF COMPLETED WELL... **170** ft. ELEVATION: .....

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

WELL'S STATIC WATER LEVEL ..... ft. below land surface measured on mo/day/yr **12-30-81**

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

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

Bore Hole Diameter... **11** in. to **170** 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)

2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation 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 **X**

TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ..... Clamped .....

1 Steel 3 RMP (SR)

2 PVC 4 ABS

6 Asbestos-Cement

7 Fiberglass

9 Other (specify below)

Welded .....

Threaded .....

Blank casing diameter ..... in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface ..... 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

2 Brass 4 Galvanized steel

5 Fiberglass

6 Concrete tile

8 RMP (SR)

9 ABS

11 Other (specify) .....

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

2 Louvered shutter 4 Key punched

6 Wire wrapped

7 Torch cut

9 Drilled holes

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.

GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Intervals: From ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination:

1 Septic tank 4 Lateral lines

2 Sewer lines 5 Cess pool

3 Watertight sewer lines 6 Seepage pit

7 Pit privy

8 Sewage lagoon

9 Feedyard

10 Livestock pens

11 Fuel storage

12 Fertilizer storage

13 Insecticide storage

14 Abandoned water well

15 Oil well/Gas well

16 Other (specify below)

Direction from well?

**North west**

How many feet? **75**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Top soil			
2	15	Gray-brown clay			
15	85	Brown & white clay			
85	90	Sandy brown clay			
90	95	White rock			
95	115	White rock & brown sandy clay			
115	125	Sandy brown clay, sand & gravel, white rock in streaks			
125	135	Sandy clay, white rock mixed			
135	145	Sand & gravel-fine			
145	150	White rock			
150	165	Sandy clay, white rock mixed			
165		Green shell			
This well was pulled and plugged with well cuttings and gravel pack.					

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) **12-30-81** 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) **1-2-82**

Under the business name of **Rosencrantz-Bemis Ent.** by (signature) **Xora Dodson**

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, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

T

29

R

24

EW

SEC.

19

SW  $\frac{1}{4}$ SW  $\frac{1}{4}$ SW  $\frac{1}{4}$ SW  $\frac{1}{4}$