

Lease: Shelor # 1-31					WATER WELL RECORD Form WWC-5 KSA 82a-1212				
LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Ford		SE 1/4 SE 1/4 SE 1/4		31		T 29 S		R 24 E/W	
Distance and direction from nearest town or city street address of well if located within city? From Minneola go 2mi Northeast on Hwy 54 then 1mi North and West into location.									
WATER WELL OWNER: Marion Shelor Rine Drilling									
RR#, St. Address, Box #: 1217 Harding Street Board of Agriculture, Division of Water Resources									
City, State, ZIP Code: Great Bend, Kansas Application Number: T 84-242									
LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 220 ft. ELEVATION:							
		Depth(s) Groundwater Encountered 1. 98 ft. 2. ft. 3. ft.							
		WELL'S STATIC WATER LEVEL 112 ft. below land surface measured on mo/day/yr 4/30/84							
		Pump test data: Well water was ft. after hours pumping gpm							
		Est. Yield 60 gpm: Well water was ft. after hours pumping gpm							
		Bore Hole Diameter 9 in. to 220 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; If yes, mo/day/yr sample was submitted							
		Water Well Disinfected? Yes No							
TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped									
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded									
7 Fiberglass Threaded									
Blank casing diameter 5 in. to 123 ft. Dia in. to ft. Dia in. to ft.									
Casing height above land surface 28 in., weight 2.85 lbs./ft. Wall thickness or gauge No. 265									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement									
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify)									
9 ABS 12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)									
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes									
7 Torch cut 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From 100 ft. to 200 ft. From ft. to ft.									
From ft. to ft. From ft. to ft.									
GRAVEL PACK INTERVALS: From 40 ft. to 220 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 0 ft. to 10 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? Northeast of water well. How many feet? 100'									
FROM TO		LITHOLOGIC LOG		FROM TO		LITHOLOGIC LOG			
0 2		surface							
2 62		sandy clay							
62 73		caliche							
73 82		sandy clay							
82 109		medium to large sand							
109 115		sandy clay with gravel							
115 122		medium to large sand							
122 153		sandy clay 50/50							
153 165		sandy clay mixed with sandstone							
165 171		blue clay							
171 209		brown sandy clay							
209 215		sandy clay 60/40							
215 220		black shale							
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) April 30, 1984 and this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's License No. 118 This Water Well Record was completed on (mo/day/yr) May 4, 1984									
Under the business name of Carlile Water Well Service by (signature)									
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.									