

1) LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Ford</u>		<u>SE ¼ SE ¼ SW ¼</u>	<u>31</u>	<u>T 29 S</u>	<u>R 25 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>2 N 4 ½ W OF MINNEOLA, KS</u>					
2) WATER WELL OWNER: <u>H-30 Drilling Company</u>					
RR#, St. Address, Box # : <u>251 N. Water Suite 10</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Wichita, Kansas 67202</u>			Lease: <u>Wilcoxin # 1</u> Application Number:		
3) LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4) DEPTH OF COMPLETED WELL: <u>86</u> ft. ELEVATION: _____ ft.			
		Depth(s) Groundwater Encountered 1. <u>42</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>42</u> ft. below land surface measured on mo/day/yr <u>21 Jan. 83</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>35</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>10</u> in. to <u>86</u> 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			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes <u>X</u> No _____			
5) TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		CASING JOINTS: Glued <u>X</u> Clamped _____	
② PVC		4 ABS		Welded _____	
Blank casing diameter <u>5</u> in. to <u>50</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		6 Asbestos-Cement		Threaded _____	
Casing height above land surface <u>12</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>214</u>		7 Fiberglass			
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		⑦ PVC	
2 Brass		4 Galvanized steel		10 Asbestos-cement	
		5 Fiberglass		8 RMP (SR)	
		6 Concrete tile		9 ABS	
				11 Other (specify) _____	
				12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		3 Mill slot		⑧ Saw cut	
2 Louvered shutter		4 Key punched		11 None (open hole)	
				9 Drilled holes	
				10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS: From <u>50</u> ft. to <u>86</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>10</u> ft. to <u>86</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6) GROUT MATERIAL:					
1 Neat cement		② Cement grout		3 Bentonite	
Grout Intervals: From <u>0</u> ft. to <u>10</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		4 Other _____			
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines		10 Livestock pens	
2 Sewer lines		5 Cess pool		11 Fuel storage	
3 Watertight sewer lines		6 Seepage pit		12 Fertilizer storage	
		7 Pit privy		13 Insecticide storage	
		8 Sewage lagoon		14 Abandoned water well	
		9 Feedyard		15 Oil well/Gas well	
				16 Other (specify below) <u>NONE</u>	
Direction from well? _____ How many feet? _____					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Soil, top			
2	21	Clay, tan and with caliche			
21	35	Sand, fine and silty			
35	39	Clay, tan and caliche			
39	48	Sand, cemented and caliche			
48	70	Sand, very fine to fine with brown rock mixed			
70	86	Clay, dakota with light sand stone streaks			
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) <u>21 JAN 83</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>325</u> This Water Well Record was completed on (mo/day/yr) <u>6 JUN 83</u> under the business name of <u>Central Well & Pump Inc.</u> by (signature) <u>[Signature]</u>					
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.					