

1 LOCATION OF WATER WELL		Section Number		Township Number		Range Number	
County: <u>Gray</u> Fraction <u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$		<u>32</u>		T <u>29</u> S		R <u>27</u> EW	
Distance and direction from nearest town or city: <u>from Junction 23 & 56</u> <u>8 1/2 miles South, 2 miles East & 1 1/2 South</u>				Street address of well if located within city?			

2 WATER WELL OWNER: <u>Chuck Edwards</u>		Board of Agriculture, Division of Water Resources Application Number:
RR#, St. Address, Box #: <u>Route #2</u>		
City, State, ZIP Code: <u>Fowler, Kansas 67841</u>		

3 DEPTH OF COMPLETED WELL: <u>165</u> ft. Bore Hole Diameter: <u>8</u> in. to _____ ft. and _____ in. to _____ ft.	
Well Water to be used as:	5 Public water supply 8 Air conditioning 11 Injection well 12 Other (Specify below)
0 Domestic 2 Irrigation 3 Feedlot 4 Industrial 6 Oil field water supply 7 Lawn and garden only 9 Dewatering 10 Observation well	
Well's static water level: <u>104</u> ft. below land surface measured on <u>August</u> month <u>12</u> day <u>1980</u> year	
Pump Test Data	Well water was _____ ft. after _____ hours pumping _____ gpm
Est. Yield <u>20</u> gpm	Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:		5 Wrought iron		8 Concrete tile		Casing Joints: Glued <u>XX</u> Clamped _____	
1 Steel		6 Asbestos-Cement		9 Other (specify below)		Welded _____	
2 PVC		7 Fiberglass				Threaded _____	
4 ABS							
Blank casing dia: <u>5</u> in. to <u>165</u> ft., Dia _____ in. to _____ ft.							
Casing height above land surface: <u>12</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>250</u> Jess & Lowe							
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC		10 Asbestos-cement			
1 Steel		3 Stainless steel		8 RMP (SR)		11 Other (specify) _____	
2 Brass		4 Galvanized steel		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		6 Wire wrapped		9 Drilled holes			
2 Louvered shutter		7 Torch cut		10 Other (specify) _____			
3 Mill slot							
4 Key punched							
Screen-Perforation Dia: <u>1/8</u> in. to <u>20</u> ft., Dia _____ in. to _____ ft.							
Screen-Perforated Intervals: From <u>140</u> ft. to <u>160</u> ft., From _____ ft. to _____ ft.							
Gravel Pack Intervals: From <u>5</u> ft. to <u>165</u> ft., From _____ ft. to _____ ft.							

5 GROUT MATERIAL: <u>X</u> 1 Neat cement		2 Cement grout		3 Bentonite		4 Other _____	
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft., From _____ ft. to _____ ft.							
What is the nearest source of possible contamination:		10 Fuel storage		14 Abandoned water well			
1 Septic tank		7 Sewage lagoon		11 Fertilizer storage		15 Oil well/Gas well	
2 Sewer lines		8 Feed yard		12 Insecticide storage		16 Other (specify below)	
3 Lateral lines		9 Livestock pens		13 Watertight sewer lines			
4 Cess pool							
5 Seepage pit							
6 Pit privy							
Direction from well: <u>West</u> How many feet: <u>10</u> ? Water Well Disinfected? Yes <u>XXX</u> No _____							
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>XXX</u> If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No <u>XXX</u>							
If Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____							
Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ gal./min.							
Type of pump: <u>Windmill</u> 1 Submersible		2 Turbine		3 Jet		4 Centrifugal	
						5 Reciprocating	
						6 Other _____	

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on <u>August</u> month <u>13</u> day <u>1980</u> year							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>179</u>							
This Water Well Record was completed on <u>Sept</u> month <u>4</u> day <u>1980</u> year under the business name of <u>JOE'S WELL SERVICE</u> <u>Cimarron, Kansas</u> by (signature) <u>Lucy J. Crick</u>							

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	15	Top soil & Clay			
	15	45	Clay			
	45	75	Clay & rock layers			
	75	90	Clay & fine sand			
	90	105	Fine sand			
	105	120	Fine sand & medium sand			
	120	135	Medium sand			
	135	150	Medium to coarse sand			
	150	165	Medium to coarse sand & clay (1 ft.)			
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.