

1 LOCATION OF WATER WELL		Fraction		Section Number		Township Number		Range Number					
County: <u>Gray</u>		<u>SE 1/4 SE 1/4 NW 1/4</u>		<u>5</u>		<u>T 29 S</u>		<u>R 29 E/W</u>					
Distance and direction from nearest town or city? <u>3 miles West, 1 1/2 miles South, 1/2 West and 1/2 South of Montezuma, Ks.</u>				Street address of well if located within city?									
2 WATER WELL OWNER: <u>David Toewes</u>													
RR#, St. Address, Box # : _____													
City, State, ZIP Code : <u>Montezuma, Kansas 67867</u>													
Board of Agriculture, Division of Water Resources Application Number: _____													
3 DEPTH OF COMPLETED WELL: <u>204</u> ft. Bore Hole Diameter: <u>8</u> in. to _____ ft., and _____ in. to _____ ft.													
Well Water to be used as:													
1 Domestic		3 Feedlot		5 Public water supply		8 Air conditioning		11 Injection well					
2 Irrigation		4 Industrial		6 Oil field water supply		9 Dewatering		12 Other (Specify below)					
				7 Lawn and garden only		10 Observation well		<u>Stock well</u>					
Well's static water level: <u>79</u> ft. below land surface measured on <u>Jan.</u> month <u>23</u> day <u>1989</u> year													
Pump Test Data : Well water was _____ ft. after _____ hours pumping. _____ gpm													
Est. Yield <u>30</u> gpm: Well water was _____ ft. after _____ hours pumping. _____ gpm													
4 TYPE OF BLANK CASING USED:													
1 Steel		3 RMP (SR)		5 Wrought iron		8 Concrete tile		Casing Joints: Glued <u>XX</u> Clamped _____					
<u>2 PVC</u>		4 ABS		6 Asbestos-Cement		9 Other (specify below)		Welded _____					
				7 Fiberglass				Threaded _____					
Blank casing dia. <u>5</u> in. to <u>204</u> ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.													
Casing height above land surface: <u>12</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>200 Jet Stream</u>													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
1 Steel		3 Stainless steel		5 Fiberglass		8 RMP (SR)		10 Asbestos-cement					
2 Brass		4 Galvanized steel		6 Concrete tile		9 ABS		11 Other (specify) _____					
								12 None used (open hole)					
Screen or Perforation Openings Are:													
1 Continuous slot		3 Mill slot		5 Gauzed wrapped		<u>8 Saw cut</u>		11 None (open hole)					
2 Louvered shutter		4 Key punched		6 Wire wrapped		9 Drilled holes							
				7 Torch cut		10 Other (specify) _____							
Screen-Perforation Dia. <u>1/8</u> in. to <u>20</u> ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.													
Screen-Perforated Intervals: From <u>180</u> ft. to <u>200</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.													
Gravel Pack Intervals: From <u>10</u> ft. to <u>204</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.													
5 GROUT MATERIAL:													
1 Neat cement		2 Cement grout		<u>3 Bentonite</u>		4 Other _____							
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.													
What is the nearest source of possible contamination: <u>None - in middle of Pasture</u>													
1 Septic tank		4 Cess pool		7 Sewage lagoon		11 Fertilizer storage		14 Abandoned water well					
2 Sewer lines		5 Seepage pit		8 Feed yard		12 Insecticide storage		15 Oil well/Gas well					
3 Lateral lines		6 Pit privy		9 Livestock pens		13 Watertight sewer lines		16 Other (specify below) _____					
Direction from well _____ How many feet _____ ? 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>Jan.</u> month <u>24</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>Feb.</u> month <u>19</u> day <u>1980</u> year under the business name of <u>Joe's Well Service Cimarron, Ks.</u> by (signature) <u>Larry Crick</u>													
7 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 & rock layers (soft)							
		45		60		Clay & fine sand (dry)							
		60		75		Fine sand, clay & fine to medium sand							
		75		90		Medium sand							
		90		105		Medium sand & clay							
		105		135		Medium sand							
		135		150		Medium sand & some coarse sand							
		150		195		Medium to coarse sand							
195		210		Medium to coarse sand, clay & rock layers									
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.													