

1 LOCATION OF WATER WELL		Fraction		Section Number		Township Number		Range Number	
County: Gray		SE ¼ SE ¼ NW ¼		16		T 29 S		R 29 W	
Distance and direction from nearest town or city? 3½ W, 4 S, ¼ E. of Montezuma					Street address of well if located within city?				
2 WATER WELL OWNER: Jacob P. Unruh									
RR#, St. Address, Box #: R.R. 1					Board of Agriculture, Division of Water Resources				
City, State, ZIP Code: Montezuma, Kansas 67867					Application Number: ----				
3 DEPTH OF COMPLETED WELL: X 203 ft. Bore Hole Diameter: 9 7/8 in. to 203 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					
Well's static water level: 55 ft. below land surface measured on Sept. month 6 day 1979 year									
Pump Test Data: Well water was ft. after hours pumping gpm									
Est. Yield 50 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 XXX Clamped	
XXX PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)		Welded	
				7 Fiberglass				Threaded	
Blank casing dia. 5 in. to 143 in. Dia. in. to ft. Dia. in. to ft.									
Casing height above land surface: 24 in., weight 2.8 lbs./ft. Wall thickness or gauge No. 265									
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		8 Saw cut XXX		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. 5 in. to 203 ft. Dia. in. to ft. Dia. in. to ft.									
Screen-Perforated Intervals: From 143 ft. to 203 ft. From ft. to ft. From ft. to ft.									
Gravel Pack Intervals: From 14 ft. to 203 ft. From ft. to ft. From ft. to ft.									
5 GROUT MATERIAL: XXX Neat cement 2 Cement grout 3 Bentonite 4 Other									
Grouted Intervals: From 4 ft. to 14 ft. From ft. to ft. From ft. to ft.									
What is the nearest source of possible contamination:									
1 Septic tank		4 Cess pool		7 Sewage lagoon		10 Fuel storage		XXX Abandoned water well	
2 Sewer lines		5 Seepage pit		8 Feed yard		11 Fertilizer storage		15 Oil well/Gas well	
3 Lateral lines		6 Pit privy		9 Livestock pens		12 Insecticide storage		16 Other (specify below)	
Direction from well: North How many feet 50 ? Water Well Disinfected? Yes XXX No									
Was a chemical/bacteriological sample submitted to Department? Yes No XXXX If yes, date sample was submitted month day year: Pump Installed? Yes XX No									
If Yes: Pump Manufacturer's name: Aermotor Model No. SD19-100 HP 1 Volts 220									
Depth of Pump Intake 110 ft. Pumps Capacity rated at 20 gal./min.									
Type of pump: XX Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other									
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on September month 13 day 1979 year									
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 252									
This Water Well Record was completed on December month 21 day 1979 year under the business name of Friesen Windmill & Supply Inc. by (signature)									
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:									
		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG		
		0	7	Top Soil					
		7	48	Clay, real sticky					
		48	60	Fine Sand with clay					
		60	203	Med. to Lar. Sand, Some Gravel					
		203	205	Rock, Very Hard					
205	208	Black Shale							
ELEVATION: Valley									
Depth(s) Groundwater Encountered Not available 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.

OFFICE USE ONLY

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