

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Grant</u>		<u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	<u>19</u>	<u>T</u> <u>29S</u> <u>(S)</u>	<u>R</u> <u>37W</u> <u>(EW)</u>
Distance and direction from nearest town or city street address of well if located within city? <u>5 1/2 miles SW of Ulysses, KS--</u>					
2 WATER WELL OWNER:		#1 MLP Winger-A			
RR#, St. Address, Box # :		Board of Agriculture, Division of Water Resources			
City, State, ZIP Code		Application Number: <u>OXY permitted</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>550</u> ft. ELEVATION: .....			
		Depth(s) Groundwater Encountered 1. <u>360</u> ft. 2. .... ft. 3. .... ft.			
		WELL'S STATIC WATER LEVEL <u>360</u> ft. below land surface measured on mo/day/yr <u>07-17-91</u>			
		Pump test data: Well water was <u>445</u> ft. after <u>1</u> hours pumping <u>70</u> gpm			
		Est. Yield <u>70</u> gpm: Well water was .... ft. after .... hours pumping .... gpm			
		Bore Hole Diameter <u>11</u> in. to <u>550</u> 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 <u>6</u> Oil field water supply    9 Dewatering    12 Other (Specify below) 2 Irrigation    4 Industrial    7 Lawn and garden only    10 Monitoring 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)    5 Wrought iron    8 Concrete tile    CASING JOINTS: Glued <u>X</u> Clamped ..... <u>2</u> PVC    4 ABS    6 Asbestos-Cement    9 Other (specify below)    Welded ..... 7 Fiberglass    .....    Threaded .....					
Blank casing diameter <u>6</u> in. to <u>550</u> ft., Dia. .... in. to .... ft., Dia. .... in. to .... ft.					
Casing height above land surface <u>24</u> in., weight .... lbs./ft. Wall thickness or gauge No. <u>.032</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel    3 Stainless steel    5 Fiberglass <u>7</u> PVC    10 Asbestos-cement 2 Brass    4 Galvanized steel    6 Concrete tile    8 RMP (SR)    11 Other (specify) ..... 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot    3 Mill slot    5 Gauzed wrapped <u>8</u> 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 <u>410</u> ft. to <u>450</u> ft., From .... ft. to .... ft.					
From <u>490</u> ft. to <u>550</u> ft., From .... ft. to .... ft.					
GRAVEL PACK INTERVALS: From <u>320</u> ft. to <u>550</u> ft., From .... ft. to .... ft.					
From .... ft. to .... ft., From .... ft. to .... ft.					
6 GROUT MATERIAL: <u>1</u> Neat cement    2 Cement grout    3 Bentonite <u>4</u> Other    Hole plug					
Grout Intervals: From <u>1</u> ft. to <u>20</u> 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 <u>15</u> 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? <u>Northeast</u> How many feet? <u>300</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	17	Sandy Clay	437	488	Sandy Clay
17	30	Clay	488	497	Fine Sand
30	56	Sandy Clay	497	534	Sandy Clay
56	68	Sand	534	543	Medium Sand
68	124	Clay	543	550	Fine Sand w/Clay streaks
124	138	Sand			
138	153	Sandy Clay			
153	278	Clay			
278	290	Fine Sand			
290	318	Clay			
318	337	Sandy Clay			
337	392	Fine Sand w/Claystreaks			
392	403	Sand			
403	424	Sand w/Clay streaks			
424	437	Medium Sand			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>07-17-91</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>KWWCL-430</u> This Water Well Record was completed on (mo/day/yr) <u>07-17-91</u> under the business name of <u>Howard Drlg. Co. Box 806 Beaver, OK 73934</u> by (signature) <i>Howard Drlg. Co.</i>					
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, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					