

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Sumner</u>	NW 1/4 SE 1/4 NE 1/4	34	T 30 S	R 3 E/W

Distance and direction from nearest town or city street address of well if located within city?

Approx. 1/2 mile NORTHEAST of Conway Springs

2 WATER WELL OWNER:	Marvin Doll	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # :	Route 1 - Box 98	Application Number: <u>not available</u>
City, State, ZIP Code :	Conway Springs, KS 67031	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: .53..... ft. ELEVATION: <u>unknown</u>
	Depth(s) Groundwater Encountered 1...16 1/2..... ft. 2..... ft. 3..... ft.
	WELL'S STATIC WATER LEVEL 16 1/2..... ft. below land surface measured on mo/day/yr 3/23/81
	Pump test data: Well water was <u>not ck'd</u> ft. after ..... hours pumping ..... gpm
	Est. Yield <u>unknown</u> gpm: Well water was ..... ft. after ..... hours pumping ..... gpm
	Bore Hole Diameter.....18. in. to ..... 53..... ft., and..... in. to ..... ft.
WELL WATER TO BE USED AS:	
1 Domestic      3 Feedlot      6 Oil field water supply      9 Dewatering      12 Other (Specify below) 2 Irrigation      4 Industrial      7 Lawn and garden only      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.....No <u>X</u>	

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: <u>Glued XX</u> Clamped
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
2 PVC	4 ABS	7 Fiberglass	Welded
Blank casing diameter ..... 8..... in. to ..... 33..... ft., Dia..... in. to ..... ft., Dia..... in. to ..... ft.			Threaded
Casing height above land surface.....12..... in., weight.....3.14..... lbs./ft. Wall thickness or gauge No.....199			
TYPE OF SCREEN OR PERFORATION MATERIAL:			
1 Steel	3 Stainless steel	5 Fiberglass	7 PVC
2 Brass	4 Galvanized steel	6 Concrete tile	8 RMP (SR)
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped	8 Saw cut
1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify) .....125 slot
SCREEN-PERFORATED INTERVALS:		From.....33..... ft. to .....53..... ft., From..... ft. to..... ft.	
GRAVEL PACK INTERVALS:		From.....10..... ft. to .....52..... ft., From..... ft. to..... ft.	
		From..... ft. to..... ft., From..... ft. to..... ft.	

6 GROUT MATERIAL:	1 <u>Neat cement</u>	2 Cement grout	3 Bentonite	4 Other
Grout Intervals: From.....0..... ft. to .....10..... 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 <u>Sewage lagoon</u>	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
Direction from well? <u>Southwest</u>			How many feet? <u>2000</u>	

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	4	Topsoil			
4	16	Red-brown clay, thin strks sand & gravel			
		strk, fine sand & gravel @ 13'			
16	22	Fine-med. sand & gravel			
22	24	Fine sand & gravel w/strks clay			
24	27	Red. brown clay w/thin strks sand			
27	39	Coarse sand & v.fine gravel			
39	45	Fine sand & gravel, some med. strks			
		39'-42'			
45	50	Fine-med. sand & gravel w/clay strks			
		& strks coarse gravel 47'50'			
50	52	Blue shale			

7 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 (mo/day/year) .....3/23/81..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ....185..... This Water Well Record was completed on (mo/day/yr) .....1/17/82..... under the business name of <u>Clarke Well &amp; Eq., Inc.</u> by (signature) <u>[Signature]</u>
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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.