

1 LOCATION OF WATER WELL		Fraction		Section Number		Township Number		Range Number	
County: <b>HASKELL</b>		<b>NE 1/4 NW 1/4 NE 1/4</b>		<b>4</b>		<b>T 30 S</b>		<b>R 32 EW</b>	
Distance and direction from nearest town or city? <b>1 East of Sublette, Ks.</b>				Street address of well if located within city?					
2 WATER WELL OWNER: <b>Orval Forney</b>									
RR#, St. Address, Box # :				Board of Agriculture, Division of Water Resources					
City, State, ZIP Code : <b>Sublette, Ks. 67877</b>				Application Number: <b>----</b>					
3 DEPTH OF COMPLETED WELL... <b>375</b> ft. Bore Hole Diameter... <b>9 7/8</b> in. to <b>375</b> ft., and ... in. to ... ft.									
Well Water to be used as:									
5 Public water supply		8 Air conditioning		11 Injection well					
<b>XX</b> Domestic 3 Feedlot		6 Oil field water supply		9 Dewatering					
2 Irrigation 4 Industrial		7 Lawn and garden only		10 Observation well					
12 Other (Specify below)									
Well's static water level ... <b>257</b> ft. below land surface measured on ... <b>August</b> month ... <b>13</b> day ... <b>1980</b> year									
Pump Test Data : Well water was ... ft. after ... hours pumping ... gpm									
Est. Yield <b>20-30</b> gpm: Well water was ... ft. after ... hours pumping ... gpm									
4 TYPE OF BLANK CASING USED:									
5 Wrought iron		8 Concrete tile		Casing Joints: Glued <b>XX</b> Clamped					
1 Steel		3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below)			
<b>XXX</b> PVC		4 ABS		7 Fiberglass		Welded			
						Threaded			
Blank casing dia ... <b>5</b> in. to ... <b>295</b> ft., Dia ... in. to ... ft., Dia ... in. to ... ft.									
Casing height above land surface ... <b>12</b> in., weight ... <b>2.8</b> lbs./ft. Wall thickness or gauge No ... <b>265</b>									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel		3 Stainless steel		5 Fiberglass		8 RMP (SR)			
2 Brass		4 Galvanized steel		6 Concrete tile		9 ABS			
						10 Asbestos-cement			
						11 Other (specify)			
						12 None used (open hole)			
Screen or Perforation Openings Are:									
5 Gauzed wrapped		<b>XXX</b> Saw cut		11 None (open hole)					
1 Continuous slot		3 Mill slot		6 Wire wrapped		9 Drilled holes			
2 Louvered shutter		4 Key punched		7 Torch cut		10 Other (specify)			
Screen-Perforation Dia ... <b>5</b> in. to ... <b>375</b> ft., Dia ... in. to ... ft., Dia ... in. to ... ft.									
Screen-Perforated Intervals: From ... <b>295</b> ft. to ... <b>375</b> ft., From ... ft. to ... ft., From ... ft. to ... ft.									
Gravel Pack Intervals: From ... <b>14</b> ft. to ... <b>375</b> ft., From ... ft. to ... ft., From ... ft. to ... ft.									
5 GROUT MATERIAL: <b>XXX</b> Neat cement 2 Cement grout 3 Bentonite 4 Other									
Grouted Intervals: From ... <b>4</b> ft. to ... <b>14</b> 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			
2 Sewer lines		5 Seepage pit		8 Feed yard		11 Fertilizer storage			
3 Lateral lines		6 Pit privy		9 Livestock pens		12 Insecticide storage			
						13 Watertight sewer lines			
						<b>XXX</b> 14 Abandoned water well			
						15 Oil well/Gas well			
						16 Other (specify below)			
Direction from well ... <b>Northeast</b> How many feet ... <b>25</b> ? Water Well Disinfected? Yes <b>XXX</b> No									
Was a chemical/bacteriological sample submitted to Department? Yes No <b>XXX</b> If yes, date sample									
was submitted ... month ... day ... year: Pump Installed? Yes <b>XXX</b> No									
If Yes: Pump Manufacturer's name ... <b>Aermotor</b> Model No. <b>SD20-300</b> HP <b>3</b> Volts <b>220</b>									
Depth of Pump Intake ... <b>252</b> ft. Pumps Capacity rated at ... <b>20</b> gal./min.									
Type of pump: <b>XXX</b> 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 ... <b>August</b> month ... <b>21</b> day ... <b>1980</b> year									
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ... <b>252</b>									
This Water Well Record was completed on ... <b>September</b> month ... <b>4</b> day ... <b>1980</b> year under the business									
name of <b>Friesen Windmill &amp; Supply, Inc.</b> by (signature) <i>[Signature]</i>									
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM TO		LITHOLOGIC LOG		FROM TO		LITHOLOGIC LOG	
		0 1		Topsoil					
		1 68		Sandy Clay					
		68 95		Fine Sand					
		95 160		Med. to Lar. Sand					
		160 221		Yellow Clay with some sand streaks					
		221 374		Fine to Med. Sand with some clay streaks					
		374 388		Clay					
ELEVATION: <b>Upland</b>									
Depth(s) Groundwater Encountered 1. <b>Not available</b> 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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END

SEC.

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NE 1/4 NW 1/4 NE 1/4