

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Kingman</u>		<u>N2 1/4 SE 1/4 NW 1/4</u>	<u>17</u>	T <u>30</u> S	R <u>8</u> EW
Distance and direction from nearest town or city street address of well if located within city? <u>3 miles East 1/4 South 1/2 East of Zanele Kansas</u>					
2 WATER WELL OWNER: <u>Janice Kangeriser Route 67142 Spirey, Kansas</u>					
RR#, St. Address, Box # _____ Board of Agriculture, Division of Water Resources City, State, ZIP Code _____ Application Number: _____					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>30</u> ft. ELEVATION: _____			
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>15</u> ft. below land surface measured on mo/day/yr <u>7-23-87</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>12</u> in. to <u>30</u> in. to _____ in. to _____ in.			
		WELL WATER TO BE USED AS:			
		<input checked="" type="checkbox"/> Domestic    3 Feedlot    6 Oil field water supply    9 Dewatering    12 Other (Specify below) <input type="checkbox"/> 2 Irrigation    4 Industrial    7 Lawn and garden only    10 Observation well			
		Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
<input checked="" type="checkbox"/> PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below) _____	Welded _____
			7 Fiberglass		Threaded _____
Blank casing diameter <u>5</u> in. to <u>20</u> ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.					
Casing height above land surface <u>2 feet</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>14</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:					
<input checked="" type="checkbox"/> Continuous slot		3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
<input type="checkbox"/> 2 Louvered shutter		4 Key punched	6 Wire wrapped	9 Drilled holes	
			7 Torch cut	10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS: From <u>20</u> ft. to <u>30</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>30</u> ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
<input checked="" type="checkbox"/> Neat cement		2 Cement grout	3 Bentonite	4 Other _____	
Grout intervals: From <u>20</u> 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	<input checked="" type="checkbox"/> 15 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>West</u>				How many feet? <u>100,000 feet</u>	
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
<u>0</u>	<u>1</u>	<u>Top Soil</u>			
<u>1</u>	<u>10</u>	<u>Brown Clay</u>			
<u>10</u>	<u>20</u>	<u>Soft fine</u>			
<u>20</u>	<u>30</u>	<u>Coarse Gravel</u>			
<u>Total Depth of Well</u> <u>30 feet</u> <u>Red Schail</u>					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>7-23-87</u> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <u>226</u> This Water Well Record was completed on (mo/day/yr) <u>7-22-87</u>					
under the business name of <u>Weber Well Service</u> by (signature) <u>Ken A Weber</u>					
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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.					