

1 LOCATION OF WATER WELL
 County: Clark Fraction: NE 1/4 SE 1/4 NE 1/4 Section Number: 17 Township Number: T 31 S Range Number: R 21E

Distance and direction from nearest town or city? 12 miles south of Bucklin
 Street address of well if located within city? N/A

2 WATER WELL OWNER: W M Schawo
 RR#, St. Address, Box #: 1100 5th
 City, State, ZIP Code: Dodge City, Ks 67801
 Board of Agriculture, Division of Water Resources
 Application Number: LEXINGTON

3 DEPTH OF COMPLETED WELL: 46' ft. Bore Hole Diameter: 8" in. to _____ ft. and _____ in. to _____ ft.
 Well Water to be used as:
 Domestic 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: 4' ft. below land surface measured on 26' March month 31 day 1980 year
 Pump Test Data: N/A Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 10 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

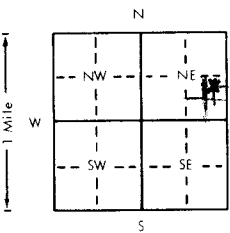
4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued Clamped
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded
 7 Fiberglass Threaded
 Blank casing dia: 5 in. to 26 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface: 18" in., weight _____ lbs./ft. Wall thickness or gauge No: 250

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 12 None used (open hole)
 Screen or Perforation Openings Are:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 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-Perforation Dia: 5 in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 26 ft. to 46 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 46' ft. to 10' ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grouted 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 Cess pool 7 Sewage lagoon 10 Fuel storage 14 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) Pasture
 Direction from well: _____ How many feet: _____ ? Water Well Disinfected? Yes No _____
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No
 If Yes: Pump Manufacturer's name: Dempster Model No: HF37552 HP: 3/4 Volts: 220
 Depth of Pump Intake: 20' ft. Pumps Capacity rated at: 10 gal./min.
 Type of pump: 1 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 30 month 80 day _____ year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 111
 This Water Well Record was completed on 2 month April day 80 year under the business name of C. Grass Drilling by (signature) Ray

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Topsoil			
2	3	Sand			
3	6	Gravel			
6	20	Sand & clay			
20	39	Gravel			
39	<u>46</u>	Tight gravel & clay			
		<u>in Alluvium</u>			
		<u>Brock 46'</u>			
		<u>4 1/2' sal 111'</u>			
		<u>TOPO</u>			
					<u>2180</u>
					<u>46'</u> <u>2134'</u>

ELEVATION: _____

Depth(s) Groundwater Encountered 1. 4' ft. 2. 46' 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.

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