

1 LOCATION OF WATER WELL: County: <u>Clark</u>	Fraction <u>SE</u> ¼ <u>SE</u> ¼ <u>SW</u> ¼	Section Number <u>24</u>	Township Number T <u>31</u> S	Range Number R <u>23</u> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">EW</span>
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Distance and direction from nearest town or city street address of well if located within city?  
11 mi NE of Ashland

2 WATER WELL OWNER: Cameron Beckendite  
 RR#, St. Address, Box # : \_\_\_\_\_  
 City, State, ZIP Code : Ashland, KS 67831  
 Board of Agriculture, Division of Water Resources  
 Application Number: \_\_\_\_\_

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>160</u> ft. ELEVATION: _____		
	Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.	WELL'S STATIC WATER LEVEL <u>55</u> ft. below land surface measured on <u>10/4/91</u>	
	Pump test data: Well water was <u>40</u> ft. after <u>1 1/2</u> hours pumping <u>30</u> gpm	Est. Yield <u>20</u> gpm. Well water was _____ ft. after _____ hours pumping _____ gpm	
	Bore Hole Diameter <u>8 3/4</u> in. to <u>160</u> ft., and _____ in. to _____ ft.	WELL WATER TO BE USED AS:	
	<input checked="" type="radio"/> Domestic <input type="radio"/> Irrigation <input type="radio"/> 3 Feedlot <input type="radio"/> 4 Industrial <input type="radio"/> 5 Public water supply <input type="radio"/> 6 Oil field water supply <input type="radio"/> 7 Lawn and garden only <input type="radio"/> 8 Air conditioning <input type="radio"/> 9 Dewatering <input type="radio"/> 10 Monitoring well <input type="radio"/> 11 Injection well <input type="radio"/> 12 Other (Specify below)	Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____	Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____

5 TYPE OF BLANK CASING USED:

<input type="radio"/> 1 Steel	<input type="radio"/> 3 RMP (SR)	<input type="radio"/> 6 Asbestos-Cement	<input type="radio"/> 9 Other (specify below)
<input checked="" type="radio"/> 2 PVC	<input type="radio"/> 4 ABS	<input type="radio"/> 7 Fiberglass	

Casing diameter 5 in. to 120 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface 24 in., weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No. 20016

CASING JOINTS: Glued  Clamped \_\_\_\_\_  
 Welded \_\_\_\_\_ Threaded \_\_\_\_\_

TYPE OF SCREEN OR PERFORATION MATERIAL:

<input type="radio"/> 1 Steel	<input type="radio"/> 3 Stainless steel	<input type="radio"/> 5 Fiberglass	<input type="radio"/> 8 RMP (SR)	<input type="radio"/> 10 Asbestos-cement
<input type="radio"/> 2 Brass	<input type="radio"/> 4 Galvanized steel	<input type="radio"/> 6 Concrete tile	<input type="radio"/> 9 ABS	<input type="radio"/> 11 Other (specify) _____

SCREEN OR PERFORATION OPENINGS ARE:

<input type="radio"/> 1 Continuous slot	<input type="radio"/> 3 Mill slot	<input type="radio"/> 5 Gauzed wrapped	<input checked="" type="radio"/> 9 Saw cut	<input type="radio"/> 11 None (open hole)
<input type="radio"/> 2 Louvered shutter	<input type="radio"/> 4 Key punched	<input type="radio"/> 6 Wire wrapped	<input type="radio"/> 9 Drilled holes	
		<input type="radio"/> 7 Torch cut	<input type="radio"/> 10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From 120 ft. to 160 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From 20 ft. to 160 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL:  1 Neat cement  Cement grout  3 Bentonite  4 Other \_\_\_\_\_

Grout Intervals: From top ft. to 20 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

<input type="radio"/> 1 Septic tank	<input type="radio"/> 4 Lateral lines	<input type="radio"/> 7 Pit privy	<input type="radio"/> 10 Livestock pens	<input type="radio"/> 14 Abandoned water well
<input type="radio"/> 2 Sewer lines	<input type="radio"/> 5 Cess pool	<input type="radio"/> 8 Sewage lagoon	<input type="radio"/> 11 Fuel storage	<input type="radio"/> 15 Oil well/Gas well
<input type="radio"/> 3 Watertight sewer lines	<input type="radio"/> 6 Seepage pit	<input type="radio"/> 9 Feedyard	<input type="radio"/> 12 Fertilizer storage	<input type="radio"/> 16 Other (specify below)

Direction from well? South How many feet? 700

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>8</u>	<u>Top soil</u>			
<u>8</u>	<u>40</u>	<u>sand &amp; gravel</u>			
<u>40</u>	<u>160</u>	<u>red bed</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was  constructed,  (2) reconstructed, or  (3) plugged under my jurisdiction and was completed on (mo/day/year) 10/4/91 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 101 This Water Well Record was completed on (mo/day/year) 12/4/91 under the business name of Rusted Well Drilling Inc by (signature) Reuben J. Bartley

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.

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