

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: Clark	NE 1/4 NE 1/4 NE 1/4	20	T 31 S	R 24 E/W

Distance and direction from nearest town or city? **7 South & 3 East of Minneola, Ks.** Street address of well if located within city?

2 WATER WELL OWNER: **Carl Sparks**
 RR#, St. Address, Box #: **Minneola, Kansas 67865**
 City, State, ZIP Code: **Minneola, Kansas 67865**
 Board of Agriculture, Division of Water Resources
 Application Number: **---**

3 DEPTH OF COMPLETED WELL: **119** ft. Bore Hole Diameter: **9 7/8** in. to **119** ft., and **---** in. to **---** ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering **XXX2** Other (Specify below)
 7 Lawn and garden only 10 Observation well **Stock**
 Well's static water level: **75** ft. below land surface measured on **January** month **6** day **1981** year
 Pump Test Data: 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 **XX** Clamped **---**
XXX PVC 4 ABS 7 Fiberglass **---** Welded **---**
 Blank casing dia: **5** in. to **79** ft., Dia **---** in. to **---** ft., Dia **---** in. to **---** ft.
 Casing height above land surface: **12** in., weight **2.8** lbs./ft. Wall thickness or gauge No. **265**

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) **---**
 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 **XXX8** Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 7 Torch cut 9 Drilled holes 10 Other (specify) **---**
 Screen-Perforation Dia: **5** in. to **119** ft., Dia **---** in. to **---** ft., Dia **---** in. to **---** ft.
 Screen-Perforated Intervals: From **79** ft. to **119** ft., From **---** ft. to **---** ft., From **---** ft. to **---** ft.
 Gravel Pack Intervals: From **10** ft. to **119** ft., From **---** ft. to **---** ft., From **---** ft. to **---** ft.

5 GROUT MATERIAL: **XXX** Neat cement 2 Cement grout 3 Bentonite 4 Other **---**
 Grouted Intervals: From **X(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 **XXXX6** Other (specify below)
 Direction from well: **Northeast** How many feet: **700** Water Well Disinfected? Yes **XX** No **---**
 Was a chemical/bacteriological sample submitted to Department? Yes **---** No **XXX** If yes, date sample was submitted: **---** month **---** day **---** year
 If Yes: Pump Manufacturer's name: **Aermotor Mill 8'** Model No. **30'** Tower **---** HP **---** Volts **---**
 Depth of Pump Intake: **---** ft. Pumps Capacity rated at **3** gal./min.
 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal **XXX6** 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 **January** month **8** day **1981** year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **252**
 This Water Well Record was completed on **February** month **8** day **1981** year under the business name of **Friesen Windmill & Supply Inc.** by (signature) **[Signature]**

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		LITHOLOGIC LOG	FROM		LITHOLOGIC LOG
	TO	TO		TO	TO	
	0	1	Topsoil			
	1	40	Very Hard Clay			
	40	46	Fine Sand			
	46	62	Clay			
	62	117	Sandy Clay w/Streaks Fine Sand			
	117	120	Very Hard Clay			

ELEVATION: **Hill**

Depth(s) Groundwater Encountered **1. Not available** 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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SEC.
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NE 1/4
NE 1/4
NE 1/4