

1 LOCATION OF WATER WELL: County: <u>Seward</u>	Fraction <u>SE 1/4 SW 1/4 SW 1/4</u>	Section Number <u>11</u>	Township Number <u>T 31 S</u>	Range Number <u>R 34 EW</u>
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Distance and direction from nearest town or city street address of well if located within city?  
From Satanta 5 South of 190 and 1 mile West

2 WATER WELL OWNER: #1 Ivas-A RR#, St. Address, Box # : City, State, ZIP Code :	<u>Gabbert &amp; Jones</u> <u>333 E. English Suite 215</u> <u>Wichita, KS 67202</u>	Board of Agriculture, Division of Water Resources Application Number: <u>T88-559</u>
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>405</u> ft. ELEVATION: .....
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Depth(s) Groundwater Encountered 1. 155 ft. 2. .... ft. 3. .... ft.

WELL'S STATIC WATER LEVEL 146 ft. below land surface measured on mo/day/yr 11-23-88

Pump test data: Well water was 135 ft. after 2 hours pumping 65 gpm

Est. Yield 70 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

Bore Hole Diameter: 9 in. to 405 ft., and ..... in. to ..... ft.

WELL WATER TO BE USED AS:

5 Public water supply	8 Air conditioning	11 Injection well
1 Domestic	3 Feedlot	<u>6 Oil field water supply</u>
2 Irrigation	4 Industrial	9 Dewatering
	7 Lawn and garden only	12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes.....No X.....; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes X No

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped .....
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1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded .....
2 PVC	4 ABS	7 Fiberglass		Threaded .....

Blank casing diameter 5 in. to 0-305 ft., Dia. .... in. to .... ft., Dia. .... in. to .... ft.

Casing height above land surface 14 in., weight 200 lbs./ft. Wall thickness or gauge No. 0.265

TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC	10 Asbestos-cement
1 Steel	3 Stainless steel	8 RMP (SR)	11 Other (specify) .....
2 Brass	4 Galvanized steel	9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped	8 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-PERFORATED INTERVALS: From 305 ft. to 405 ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 140 ft. to 405 ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other .....
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Grout intervals: From 0 ft. to 20 ft., From ..... 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	<u>15 Oil well/Gas well</u>
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage	

Direction from well? Southwest How many feet? 250

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	146	Overburden			
146	160	Sand and gravel			
160	180	Sand and gravel			
180	405	Sand and gravel			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>11-23-88</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>142</u> This Water Well Record was completed on (mo/day/yr) <u>11-28-88</u> under the business name of <u>T &amp; W Water Well Service, Inc</u> by (signature) <u>[Signature]</u>
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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: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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SEC.

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