

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: Stevens	1/4 SW 1/4 NE 1/4	35	T 31 S	R 35 E (W)

Distance and direction from nearest town or city? **Moscow 1/2 South - 6 1/2 East - 1/4 South - 1/4 East** Street address of well if located within city?

2 WATER WELL OWNER: **Carl Brollier**
 RR#, St. Address, Box #: **RFD** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **Moscow, KS 67952** Application Number: **27561**

3 DEPTH OF COMPLETED WELL: **460** ft. Bore Hole Diameter: **26** in. to **460** ft., and _____ in. to _____ ft.
 Well Water to be used as:
 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial
 5 Public water supply 6 Oil field water supply 7 Lawn and garden only
 8 Air conditioning 9 Dewatering 10 Observation well
 11 Injection well 12 Other (Specify below) _____
 Well's static water level _____ ft. below land surface measured on **Pump setter done test pumping** _____ day _____ year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 2 PVC 3 RMP (SR) 4 ABS
 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass
 8 Concrete tile 9 Other (specify below) _____
 Casing Joints: Glued _____ Clamped _____ Welded Threaded _____
 Blank casing dia **16** in. to **460** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **12** in., weight **36.4** lbs./ft. Wall thickness or gauge No. **.219**
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 2 Brass 3 Mill slot 4 Galvanized steel
 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) _____
 12 None used (open hole) _____
 Screen or Perforation Openings Are:
 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched
 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) _____
 11 None (open hole) _____
 Screen-Perforation Dia **16** in. to **460** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: ~~xxxx~~ Perf **343-359** ft. ~~xx~~ Screen **359-399** ft. ~~xxxx~~ Perf **399-417** ft. ~~xxx~~ Screen **417-447** ft.
~~xxxx~~ Perf **447-460** ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 Gravel Pack Intervals: From **10** ft. to **460** ft. From _____ ft. to _____ 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. From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy 7 Sewage lagoon 8 Feed yard 9 Livestock pens 10 Fuel storage 11 Fertilizer storage 12 Insecticide storage 13 Watertight sewer lines 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) _____
 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 _____ Model No. _____ HP _____ Volts _____
 Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ 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 **April** month **29** day **1980** year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **208**
 This Water Well Record was completed on **November** month **12** day **1980** year under the business name of **Minter Wilson Drilling Co., Inc.** by (signature) *M. Irene DeKeyser*

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

	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
			Test log attached			

ELEVATION: _____

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ 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
T
R
SEC. 35
C of SW 1/4 NE 1/4

March 7, 1980

Carl Brollier
Stevens County

Location: NE 35-31-35 - From pasture gate $\frac{1}{4}$ mile west $\frac{1}{2}$ south
 $\frac{1}{2}$ West

Static Water Level -

Test #

0	1	Top Soil
1	139	Brown Clay
139	159	Fine to Med. Sand & Gravel 10% Clay (Loose)
159	173	Brown Clay
173	241	Fine to Med. Sand & Gravel 10% Clay (Loose)
241	253	Brown Clay
253	260	Fine to Med. Sand & Gravel 10% Clay (Loose)
260	270	Brown Sandy Clay 30% Gravel
270	276	Brown White Clay (Tight)
276	343	Brown & Gray Clay (Tight)
343	399	Fine to Med. Sand & Gravel 10% Clay (Loose)
399	413	Brown & Gray Clay with White Rock (Hard)
413	447	Fine to Med. Sand & Gravel 10% Clay (Loose)
447	478	Brown & Gray Clay (Hard) (With White Rock)
478	485	Gray & Yellow Clay with White Rock (Hard)

TD 460'