

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <b>Harber</b>		<b>NE 1/4 SE 1/4 NE 1/4</b>	<b>2</b>	T <b>32</b> S	R <b>18w</b> E/W
Distance and direction from nearest town or city street address of well if located within city?					
<b>North west edge o Medicine Lodge</b>					
2 WATER WELL OWNER: <b>Jerry Arensdorf</b>					
RR#, St. Address, Box # : <b>411 west 2 nd</b>				Board of Agriculture, Division of Water Resources	
City, State, ZIP Code : <b>Medicine Lodge, Ka . 67104</b>				Application Number:	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <b>42</b> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <b>24</b> ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <b>14</b> ft. below land surface measured on mo/day/yr <b>3-26-</b>			
		Pump test data: Well water was ft. after hours pumping gpm			
		Est. Yield <b>12.20</b> gpm: Well water was ft. after hours pumping gpm			
		Bore Hole Diameter <b>9</b> in. to <b>42</b> ft. and in. to ft.			
TYPE OF BLANK CASING USED:		CASING JOINTS: <b>Glued</b> <b>Clamped</b>			
1 Steel 3 RMP (SR)		5 Wrought iron 8 Concrete tile			
2 PVC 4 ABS		6 Asbestos-Cement 9 Other (specify below)			
Blank casing diameter <b>5</b> in. to <b>28</b> ft. Dia in. to ft. Dia in. to ft.		7 Fiberglass Threaded			
Casing height above land surface <b>18</b> in., weight lbs./ft. Wall thickness or gauge No. <b>210</b>					
TYPE OF SCREEN OR PERFORATION MATERIAL:		10 Asbestos-cement			
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:		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 <b>28</b> ft. to <b>42</b> ft. From ft. to ft.					
GRAVEL PACK INTERVALS: From <b>23</b> ft. to <b>42</b> ft. From ft. to ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Intervals: From <b>3</b> ft. to <b>23</b> 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		11 Fuel storage 15 Oil well/Gas well			
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)		3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage			
Direction from well? <b>east</b>		How many feet? <b>50</b>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<b>0</b>	<b>5</b>	<b>soil</b>			
<b>5</b>	<b>24</b>	<b>clay</b>			
<b>24</b>	<b>26</b>	<b>fine sand</b>			
<b>26</b>	<b>39</b>	<b>sand some medium</b>			
<b>39</b>	<b>42</b>	<b>shale</b>			
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) <b>3-26-97</b> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <b>140</b> This Water Well Record was completed on (mo/day/yr) <b>4-12-97</b>					
under the business name of <b>Lyman Inc.</b> by (signature) <i>Lyman Inc.</i>					
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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					