

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: COMANCHE		SW 1/4 NW 1/4 NE 1/4	36	T 32 S	R 19 E
Distance and direction from nearest town or city street address of well if located within city? From Coldwater 3 south 1/2 W 1/4 S					
2 WATER WELL OWNER: R.D. Reynolds					
RR#, St. Address, Box # : City, State, ZIP Code : Protection KS				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: 55 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. 33 ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL 28 ft. below land surface measured on mo/day/yr			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter 10 in. to 55 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 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No ☒ If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes _____ No ☒			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
2 PVC		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
Blank casing diameter 5 in. to 35 ft., Dia.				8 Concrete tile	
Casing height above land surface 24 in., weight 2.37 lbs./ft.				9 Other (specify below)	
TYPE OF SCREEN OR PERFORATION MATERIAL:				CASING JOINTS: Glued ☒ Clamped _____	
1 Steel		3 Stainless steel		Welded _____	
2 Brass		4 Galvanized steel		Threaded _____	
3 Fiberglass		6 Concrete tile		8 Asbestos-cement	
8 RMP (SR)		9 ABS		11 Other (specify) _____	
11 Other (specify) _____		12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped		8 Saw cut	
1 Continuous slot		6 Wire wrapped		9 Drilled holes	
2 Louvered shutter		7 Torch cut		10 Other (specify) _____	
4 Key punched				11 None (open hole)	
SCREEN-PERFORATED INTERVALS:		From 35 ft. to 55 ft.		From _____ ft. to _____ ft.	
		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
GRAVEL PACK INTERVALS:		From 20 ft. to 50 ft.		From _____ ft. to _____ ft.	
		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
6 GROUT MATERIAL:					
1 Neat cement		2 Cement grout		3 Bentonite	
4 Other _____					
Grout Intervals: From 0 ft. to 20 ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
What is the nearest source of possible contamination:		10 Livestock pens		14 Abandoned water well	
1 Septic tank		4 Lateral lines		11 Fuel storage	
2 Sewer lines		5 Cess pool		12 Fertilizer storage	
3 Watertight sewer lines		6 Seepage pit		13 Insecticide storage	
		7 Pit privy		15 Oil well/Gas well	
		8 Sewage lagoon		16 Other (specify below)	
		9 Feedyard		NONE	
Direction from well?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	15	White Clay			
16	34	White Clay + SAND	15	34	
35	36	SAND + GRAVEL			
37	55	White Clay			
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) 5-27-93 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 411 This Water Well Record was completed on (mo/day/yr) 6-1-93 under the business name of Lehigh Water Well Serv. by (signature) Roy L. Loh					
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.					

OFFICE USE ONLY

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