

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: MEADE		NE 1/4 NE 1/4 SW 1/4	1	T 32 S	R 28 E/W
Distance and direction from nearest town or city street address of well if located within city? 1/2 Mile East of Meade, Kansas					
2 WATER WELL OWNER: Mr. Pete Cornelson					
RR#, St. Address, Box # :			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Meade, Kansas 67864			Application Number: ---		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL... 300..... ft. ELEVATION: Slope.....			
		Depth(s) Groundwater Encountered 1. Not available 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL .. 35..... ft. below land surface measured on mo/day/yr May 2, 1985			
		Pump test data: Well water was ft. after hours pumping gpm			
		Est. Yield .. XX 20 gpm: Well water was ft. after hours pumping gpm			
		Bore Hole Diameter .. 9 7/8 .in. to .. 300..... ft., and..... in. to ft.			
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well			
		XX Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)			
		2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well			
		Was a chemical/bacteriological sample submitted to Department? Yes..... No..... XX If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes XX No			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued XX Clamped.....
XX PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded.....
			7 Fiberglass		Threaded.....
Blank casing diameter .. 5..... in. to 240..... 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	XX PVC	10 Asbestos-cement
2 Brass		4 Galvanized steel	6 Concrete tile	8 RMP (SR)	11 Other (specify).....
				9 ABS	12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		3 Mill slot	5 Gauzed wrapped	XX Saw cut	11 None (open hole)
2 Louvered shutter		4 Key punched	6 Wire wrapped	9 Drilled holes	
			7 Torch cut	10 Other (specify).....	
SCREEN-PERFORATED INTERVALS: From..... 240..... ft. to 300..... ft., From..... ft. to..... ft.					
From..... ft. to..... ft., From..... ft. to..... ft.					
GRAVEL PACK INTERVALS: From..... 14..... ft. to 300..... ft., From..... ft. to..... ft.					
From..... ft. to..... ft., From..... ft. to..... ft.					
6 GROUT MATERIAL: XX Neat cement 2 Cement grout 3 Bentonite 4 Other.....					
Grout intervals: From..... 4..... ft. to 14..... ft., From..... ft. to..... ft., From..... ft. to..... ft.					
What is the nearest source of possible contamination:					
XX 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	15 Oil well/Gas well
3 Watertight sewer lines		6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
				13 Insecticide storage	
Direction from well? South		How many feet? 100			
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Topsoil			
2	41	Clay			
41	52	Clay and Fine Sand			
52	64	Clay			
64	138	Blue Clay			
138	155	Clay			
155	184	Clay, Fine Sand and Gravel Strips			
184	200	Clay			
200	230	Clay, Fine Sand & Gravel			
230	274	Clay			
274	288	Clay, Fine Sand & Gravel			
288	308	Red Gravel			
308	315	Sandstone			
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) May 3, 1985 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 (mo/day/yr) May 2, 1985 under the business name of FRIESEN WINDMILL & SUPPLY INC. by (signature) <i>Ray D. Friesen</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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					

04-8403738633