

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <b>SEWARD</b>		<b>NE 1/4 NE 1/4 NW 1/4</b>	<b>2</b>	<b>T 32 S</b>	<b>R 32 E/W</b>
Distance and direction from nearest town or city? <b>3 West and 5 North of Kismet, Ks.</b>			Street address of well if located within city?		
2 WATER WELL OWNER: <b>Dannie Nelson</b>					
RR#, St. Address, Box # :			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <b>Kismet, Ks. 67859</b>			Application Number: <b>----</b>		
3 DEPTH OF COMPLETED WELL: <b>425</b> ft. Bore Hole Diameter: <b>9 7/8</b> in. to <b>425</b> 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	
2 Irrigation 4 Industrial		7 Lawn and garden only		10 Observation well	
Well's static water level: <b>218</b> ft. below land surface measured on <b>August</b> month <b>19</b> day <b>1980</b> year					
Pump Test Data: Well water was ..... ft. after ..... hours pumping ..... gpm					
Est. Yield <b>35</b> gpm: Well water was ..... ft. after ..... hours pumping ..... gpm					
4 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
XX PVC		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
Blank casing dia: <b>5</b> in. to <b>345</b> ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.		Casing Joints: Glued <b>XX</b> Clamped ..... Welded ..... Threaded .....			
Casing height above land surface: <b>12</b> in., weight <b>2.8</b> lbs./ft. Wall thickness or gauge No. <b>.265</b>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				8 RMP (SR)	
				9 ABS	
Screen or Perforation Openings Are:		5 Gauzed wrapped		XXX Saw cut	
1 Continuous slot		3 Mill slot		6 Wire wrapped	
2 Louvered shutter		4 Key punched		7 Torch cut	
				10 Other (specify) .....	
Screen-Perforation Dia: <b>5</b> in. to <b>425</b> ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.					
Screen-Perforated Intervals: From <b>345</b> ft. to <b>425</b> ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.					
Gravel Pack Intervals: From <b>14</b> ft. to <b>425</b> ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.					
5 GROUT MATERIAL: XXX Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grouted Intervals: From <b>4</b> ft. to <b>14</b> ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Cess pool		7 Sewage lagoon	
2 Sewer lines		5 Seepage pit		8 Feed yard	
3 Lateral lines		6 Pit privy		XXX 9 Livestock pens	
Direction from well: <b>West</b>		How many feet: <b>75</b>		? Water Well Disinfected? Yes: <b>XXX</b> No	
Was a chemical/bacteriological sample submitted to Department? Yes: <b>XXX</b> No: <b>XXX</b> If yes, date sample was submitted: ..... month ..... day ..... year: Pump Installed? Yes: <b>XXX</b> No: <b>XXX</b>					
If Yes: Pump Manufacturer's name: <b>Aermotor</b> Model No.: <b>SD12-150</b> HP: <b>1 1/2</b> Volts: <b>220</b>					
Depth of Pump Intake: <b>252</b> ft. Pumps Capacity rated at: <b>10</b> gal./min.					
Type of pump: <b>XX</b> Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other					
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on <b>August XX</b> month <b>XX</b> day <b>21</b> year <b>1980</b>					
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>252</b>					
This Water Well Record was completed on <b>August</b> month <b>27</b> day <b>1980</b> year under the business name of <b>Friesen Windmill &amp; Supply Inc.</b> by (signature) <i>[Signature]</i>					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		LITHOLOGIC LOG			
		FROM	TO	LITHOLOGIC LOG	
		0	6	Topsoil	
		6	98	Sandy Clay	
		98	235	Med. to Lar. Sand	
		235	418	Fine Sand, Med. to Lar. Sand, some clay streaks (small)	
		418	428	Yellow Clay	
ELEVATION: <b>Upland</b>					
Depth(s) Groundwater Encountered 1. <b>Not available</b> 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.