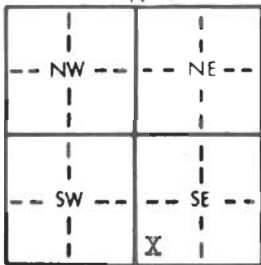


1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Seward	SW 1/4 SW 1/4 SE 1/4	10	T 32 S	R 32 E/W

Distance and direction from nearest town or city street address of well if located within city?

10 1/2 West of Plains, Kansas

2 WATER WELL OWNER:	Mr. Norman E. Roehr	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # :	R.F.D.	Application Number: ---
City, State, ZIP Code :	Kismet, Kansas 67859	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: 397 ft. ELEVATION: Upland
	Depth(s) Groundwater Encountered 1. 237 ft. 2. 280 ft. 3. 360 ft.
	WELL'S STATIC WATER LEVEL 222 ft. below land surface measured on mo/day/yr Oct. 6, 1982
	Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
	Est. Yield 50 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
	Bore Hole Diameter 9 7/8 in. to 397 ft. and _____ in. to _____ ft.
	WELL WATER TO BE USED AS:
	<input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> 12 Other (Specify below)
	<input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 4 Industrial <input type="checkbox"/> 7 Lawn and garden only <input type="checkbox"/> 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 XXX No _____

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued XX Clamped _____
<input type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 RMP (SR)	<input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 9 Other (specify below) _____
<input checked="" type="checkbox"/> PVC	<input type="checkbox"/> 4 ABS	<input type="checkbox"/> 7 Fiberglass	<input type="checkbox"/> Welded _____
			<input type="checkbox"/> Threaded _____
Blank casing diameter _____ in. to _____ 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:	<input checked="" type="checkbox"/> PVC	<input type="checkbox"/> 10 Asbestos-cement	
<input type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 Stainless steel	<input type="checkbox"/> 5 Fiberglass	<input type="checkbox"/> 8 RMP (SR)
<input type="checkbox"/> 2 Brass	<input type="checkbox"/> 4 Galvanized steel	<input type="checkbox"/> 6 Concrete tile	<input type="checkbox"/> 9 ABS
			<input type="checkbox"/> 11 Other (specify) _____
			<input type="checkbox"/> 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:	<input type="checkbox"/> 5 Gauzed wrapped	<input checked="" type="checkbox"/> Saw cut	<input type="checkbox"/> 11 None (open hole)
<input type="checkbox"/> 1 Continuous slot	<input type="checkbox"/> 3 Mill slot	<input type="checkbox"/> 6 Wire wrapped	<input type="checkbox"/> 9 Drilled holes
<input type="checkbox"/> 2 Louvered shutter	<input type="checkbox"/> 4 Key punched	<input type="checkbox"/> 7 Torch cut	<input type="checkbox"/> 10 Other (specify) _____
SCREEN-PERFORATED INTERVALS: From 357 ft. to 397 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From 14 ft. to 397 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.			

6 GROUT MATERIAL: <input checked="" type="checkbox"/> Neat cement	<input type="checkbox"/> 2 Cement grout	<input type="checkbox"/> 3 Bentonite	<input type="checkbox"/> 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:	<input type="checkbox"/> 1 Septic tank	<input type="checkbox"/> 4 Lateral lines	<input type="checkbox"/> 7 Pit privy
<input type="checkbox"/> 2 Sewer lines	<input type="checkbox"/> 5 Cess pool	<input type="checkbox"/> 8 Sewage lagoon	<input type="checkbox"/> 10 Livestock pens
<input type="checkbox"/> 3 Watertight sewer lines	<input type="checkbox"/> 6 Seepage pit	<input type="checkbox"/> 9 Feedyard	<input type="checkbox"/> 11 Fuel storage
			<input type="checkbox"/> 12 Fertilizer storage
			<input type="checkbox"/> 13 Insecticide storage
			<input checked="" type="checkbox"/> 14 Abandoned water well
			<input type="checkbox"/> 15 Oil well/Gas well
			<input checked="" type="checkbox"/> 16 Other (specify below) Re-Use Pit
Direction from well? North		How many feet? 700	

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Topsoil			
2	50	Sandy Clay			
50	60	Fine Sand w/Clay			
60	90	Caliche			
90	105	Medium Sand			
105	120	Sandy Clay			
120	135	Medium Sand			
135	180	Sandy Clay w/Fine Sand Strips			
180	195	Medium Sand			
195	237	Clay			
237	280	Fine to Medium Sand			
280	360	Fine Sand			
360	406	Medium Sand			
406	440	Dakota			

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) October 12, 1982 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/year) October 19, 1982 under the business name of Friesen Windmill & Supply Inc. by (signature) _____
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.