

1 LOCATION OF WATER WELL		Fraction		Section Number		Township Number		Range Number	
County: <b>Clark</b>		<b>SE 1/4 SW 1/4 SE 1/4</b>		<b>34</b>		<b>T 33 S</b>		<b>R 24 SW</b>	
Distance and direction from nearest town or city? <b>7 West, 5 South, 1/4 West of Ashland, Ks.</b>					Street address of well if located within city?				
2 WATER WELL OWNER: <b>Henry Gardiner</b>					Board of Agriculture, Division of Water Resources				
RR#, St. Address, Box # : <b>Ashland, Ks. 67831</b>					Application Number: <b>----</b>				
3 DEPTH OF COMPLETED WELL: <b>79</b> ft. Bore Hole Diameter: <b>9 7/8</b> in. to <b>79</b> ft. and _____ in. to _____ ft.					Well Water to be used as:				
1 Domestic		3 Feedlot		5 Public water supply		8 Air conditioning		11 Injection well	
2 Irrigation		4 Industrial		6 Oil field water supply		9 Dewatering		<b>XXXX</b> Other (Specify below)	
				7 Lawn and garden only		10 Observation well		<b>Stock</b>	
Well's static water level: <b>23</b> ft. below land surface measured on <b>October</b> month <b>6</b> day <b>1980</b> year					Pump Test Data				
Est. Yield <b>30</b> gpm:		Well water was _____ ft. after _____ hours pumping _____ gpm		Well water was _____ ft. after _____ hours pumping _____ gpm					
4 TYPE OF BLANK CASING USED:					Casing Joints: <b>XXX</b> Clamped _____				
1 Steel		3 RMP (SR)		5 Wrought iron		8 Concrete tile		9 Other (specify below)	
<b>XXX</b> PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)		Welded _____	
				7 Fiberglass				Threaded _____	
Blank casing dia: <b>5</b> in. to <b>49</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					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:					<b>XX</b> PVC				
1 Steel		3 Stainless steel		5 Fiberglass		8 RMP (SR)		10 Asbestos-cement	
2 Brass		4 Galvanized steel		6 Concrete tile		9 ABS		11 Other (specify) _____	
								12 None used (open hole)	
Screen or Perforation Openings Are:					5 Gauzed wrapped <b>XXXX</b> Saw cut				
1 Continuous slot		3 Mill slot		6 Wire wrapped		9 Drilled holes		11 None (open hole)	
2 Louvered shutter		4 Key punched		7 Torch cut		10 Other (specify) _____			
Screen-Perforation Dia: <b>5</b> in. to <b>XX</b> <b>79</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Screen-Perforated Intervals: From <b>49</b> ft. to <b>79</b> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.									
Gravel Pack Intervals: From <b>14</b> ft. to <b>79</b> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.									
5 GROUT MATERIAL: <b>XXXX</b> 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:					10 Fuel storage				
1 Septic tank		4 Cess pool		7 Sewage lagoon		11 Fertilizer storage		14 Abandoned water well	
2 Sewer lines		5 Seepage pit		8 Feed yard		12 Insecticide storage		<b>XXXX</b> Other (specify below)	
3 Lateral lines		6 Pit privy		9 Livestock pens		13 Watertight sewer lines		<b>Latrine</b>	
Direction from well: <b>East</b> How many feet: <b>100</b> ? Water Well Disinfected? Yes: <b>XXX</b> No: _____									
Was a chemical/bacteriological sample submitted to Department? Yes _____ No: <b>XXX</b> If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes: <b>XXX</b> No: _____									
If Yes: Pump Manufacturer's name: <b>Aermotor</b> Model No.: <b>SD12-50</b> HP: <b>1/2</b> Volts: <b>220</b>									
Depth of Pump Intake: <b>63</b> ft. Pumps Capacity rated at: <b>10</b> gal./min.									
Type of pump: <b>XXX</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>October</b> month <b>9</b> day <b>1980</b> year									
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>October</b> month <b>27</b> day <b>1980</b> year under the business name of <b>Friesen Windmill &amp; Supply Inc.</b> by (signature) _____									
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM		TO		LITHOLOGIC LOG		LITHOLOGIC LOG	
		0		3		Topsoil			
		3		80		Fine to Med. Sand w/some Clay Streaks			
ELEVATION: <b>Upland</b>									
Depth(s) Groundwater Encountered <b>1. 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.									

OFFICE USE ONLY  
T 33  
R 24  
SEC. 34  
SE 1/4 SW 1/4 SE 1/4