

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number			
County: <u>Meade</u>		<u>NE 1/4 NE 1/4 NE 1/4</u>		<u>8</u>		T <u>34</u> S		R <u>30</u> E <u>W</u>			
Distance and direction from nearest town or city street address of well if located within city? <u>From Plains west edge 9 miles South</u>											
2 WATER WELL OWNER: <u>Bill Wilson</u>					Board of Agriculture, Division of Water Resources						
RR#, St. Address, Box #: <u>1690 N. Calhoun</u>					Application Number:						
City, State, ZIP Code: <u>Liberal, KS. 67901</u>											
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL: <u>400'</u> ft. ELEVATION: _____								
			Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.								
			WELL'S STATIC WATER LEVEL <u>200'</u> 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: <u>9 7/8"</u> in. to _____ ft., and _____ in. to _____ ft.								
			WELL WATER TO BE USED AS:								
			1 <u>Domestic</u> 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 <u>X</u> ; If yes, mo/day/yr sample was submitted _____								
			Water Well Disinfected? Yes <u>X</u> No _____								
5 TYPE OF BLANK CASING USED:											
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <u>X</u> Clamped _____ 2 <u>PVC</u> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____											
Blank casing diameter _____ in. to <u>380'</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to <u>SDR 17</u> ft.											
Casing height above land surface: <u>12"</u> in., weight _____ lbs./ft. Wall thickness or gauge No. _____											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
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:											
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 <u>Saw cut</u> 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes											
SCREEN-PERFORATED INTERVALS: From _____ ft. to <u>400'</u> ft., From _____ ft. to _____ ft.											
GRAVEL PACK INTERVALS: From <u>23</u> ft. to <u>400'</u> ft., From _____ ft. to _____ ft.											
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other _____											
Grout Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.											
What is the nearest source of possible contamination:											
1 Septic tank 4 Lateral lines 7 Pit privy 10 <u>Livestock pens</u> 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? <u>All Around</u> How many feet? _____											
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS	
0		5		Sandy Topsoil		350		358		Blue clay	
5		45		Brown clay		358		368		Coarse gravel	
45		50		Fine Sand		368		374		Blue clay	
50		75		Brown clay		374		380		Med. sand	
75		94		Fine to med. sand		380		400		Med. sand + blue clay	
94		99		Sandrock layers							
99		110		Fine sand + brown clay mixed							
110		122		Brown clay + fine sand layers							
122		131		Med. sand							
131		210		Med. sand + sandrock layers							
210		220		Blue clay							
220		222		Med. sand							
222		270		Blue clay							
270		291		Blue clay + sandstone layers							
291		350		Med. Coarse Sand							
7 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 (mo/day/year) <u>4-15-93</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>533</u> This Water Well Record was completed on (mo/day/yr) <u>6-9-93</u> under the business name of <u>Jantzen Water Well Repair</u> by (signature) _____											