



1 LOCATION OF WATER WELL: County: <u>Meade</u>		Fraction <u>NW 1/4 Sec 50 T16S R28E</u>	Section Number <u>16</u>	Township Number <u>35</u> S	Range Number <u>28</u> E
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Distance and direction from nearest town or city street address of well if located within city?
1 1/4 S + 3/4 W From Meade

2 WATER WELL OWNER: Lloyd Sneath

RR#, St. Address, Box # :
City, State, ZIP Code : Meade KS 67864

Board of Agriculture, Division of Water Resources
Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF COMPLETED WELL 160 ft. ELEVATION: _____

Depth(s) Groundwater Encountered _____ ft.

WELL'S STATIC WATER LEVEL 63 ft. below land surface measured on mo/day/yr 1-6-03

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

WELL WATER TO BE USED AS:

<input checked="" type="radio"/> Domestic	<input type="radio"/> Feedlot	<input type="radio"/> Oil field water supply	<input type="radio"/> Air conditioning	<input type="radio"/> Injection well
<input type="radio"/> Irrigation	<input type="radio"/> Industrial	<input type="radio"/> Domestic (lawn & garden)	<input type="radio"/> Dewatering	<input type="radio"/> Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes _____ No ☒ If yes, mo/day/yrs sample was submitted _____

Water Well Disinfected? Yes ☒ No _____

5 TYPE OF BLANK CASING USED:

<input checked="" type="radio"/> Steel	<input type="radio"/> RMP (SR)	<input type="radio"/> Wrought iron	<input type="radio"/> Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
<input checked="" type="radio"/> PVC	<input type="radio"/> ABS	<input type="radio"/> Asbestos-Cement	<input type="radio"/> Other (specify below)	Welded _____
		<input type="radio"/> Fiberglass		Threaded _____

Blank casing diameter 5 in. to 100 ft., Dia 5 in. to 120-140 ft., Dia _____ in. to _____ ft.

Casing height above land surface 24 in., weight _____ lbs./ft. Wall thickness or gauge No. 280 #

TYPE OF SCREEN OR PERFORATION MATERIAL:

<input type="radio"/> Steel	<input type="radio"/> Stainless Steel	<input type="radio"/> Fiberglass	<input type="radio"/> RMP (SR)	<input type="radio"/> Asbestos-Cement
<input type="radio"/> Brass	<input type="radio"/> Galvanized Steel	<input type="radio"/> Concrete tile	<input type="radio"/> ABS	<input type="radio"/> Other (Specify)
				<input type="radio"/> None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

<input type="radio"/> Continuous slot	<input type="radio"/> Mill slot	<input type="radio"/> Guazed wrapped	<input type="radio"/> Saw cut	<input type="radio"/> None (open hole)
<input type="radio"/> Louvered shutter	<input type="radio"/> Key punched	<input type="radio"/> Wire wrapped	<input type="radio"/> Drilled holes	
		<input type="radio"/> Torch cut	<input type="radio"/> Other (specify)	_____ ft.

SCREEN-PERFORATED INTERVALS: From 100 ft. to 120 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 100 ft. to 160 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other _____

Grout Intervals: From top ft. to 20 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

<input type="radio"/> Septic tank	<input type="radio"/> Lateral lines	<input type="radio"/> Pit privy	<input type="radio"/> Livestock pens	<input type="radio"/> Abandoned water well
<input type="radio"/> Sewer lines	<input type="radio"/> Cess pool	<input type="radio"/> Sewage lagoon	<input type="radio"/> Fuel storage	<input type="radio"/> Oil well/Gas well
<input type="radio"/> Watertight sewer lines	<input type="radio"/> Seepage pit	<input type="radio"/> Feedyard	<input type="radio"/> Fertilizer storage	<input type="radio"/> Other (specify below)
			<input type="radio"/> Insecticide storage	

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>5</u>	<u>brown clay top soil</u>			
<u>5</u>	<u>116</u>	<u>sand + gravel</u>			
<u>116</u>	<u>125</u>	<u>brown clay</u>			
<u>125</u>	<u>135</u>	<u>sand + gravel</u>			
<u>135</u>	<u>150</u>	<u>brown clay</u>			
<u>150</u>	<u>160</u>	<u>sand + gravel</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) 1-7-03, and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 101. This Water Well Record was completed on (mo/day/yr) 1-29-03 under the business name of Bartel Well Drilling, Inc. by (signature) Renee J. Bartel

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, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.