

<b>1 LOCATION OF WATER WELL:</b>		Fraction	Section Number	Township Number	Range Number
County: <u>Rawlins</u>		<u>NE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$	<u>20</u>	T <u>3</u> S	R <u>36</u> E <u>W</u>
Distance and direction from nearest town or city street address of well if located within city?					
<u>in town</u>					
<b>2 WATER WELL OWNER:</b> <u>D&amp;L SERVICE</u>					
RR#, St. Address, Box # : <u>Highway 36</u>					
City, State, ZIP Code : <u>McDonald, Ks.</u>					
Board of Agriculture, Division of Water Resources Application Number:					
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>		<b>4 DEPTH OF COMPLETED WELL:</b> <u>230</u> ft. <b>ELEVATION:</b>			
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>209.51</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 _____ in. to _____ ft., and _____ in. to _____ ft.			
		WELL WATER TO BE USED AS:			
		1 Domestic    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>(No)</u> ; If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes _____ No <u>(No)</u>			
<b>5 TYPE OF BLANK CASING USED:</b>					
1 Steel		3 RMP (SR)		CASING JOINTS: Glued _____ Clamped _____	
② PVC		4 ABS		Welded _____	
		7 Fiberglass		⑦ Threaded	
Blank casing diameter <u>2</u> in. to <u>200</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height above land surface <u>0</u> in., weight _____ lbs./ft. Wall thickness or gauge No. _____					
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>					
1 Steel		3 Stainless steel		10 Asbestos-cement	
2 Brass		4 Galvanized steel		11 Other (specify) _____	
		6 Concrete tile		12 None used (open hole)	
		9 ABS			
<b>SCREEN OR PERFORATION OPENINGS ARE:</b>					
1 Continuous slot		③ Mill slot		8 Saw cut	
2 Louvered shutter		4 Key punched		11 None (open hole)	
		6 Wire wrapped		9 Drilled holes	
		7 Torch cut		10 Other (specify) _____	
<b>SCREEN-PERFORATED INTERVALS:</b> From <u>200</u> ft. to <u>230</u> ft. From _____ ft. to _____ ft.					
From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
<b>GRAVEL PACK INTERVALS:</b> From <u>198</u> ft. to <u>230</u> ft. From _____ ft. to _____ ft.					
From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
<b>6 GROUT MATERIAL:</b> 1 Neat cement ② Cement grout ⑦ Bentonite 4 Other _____					
Grout Intervals: From <u>0</u> ft. to <u>2.25</u> ft. From <u>2.25</u> ft. to <u>196</u> ft. From <u>196</u> ft. to <u>198</u> ft.					
<b>What is the nearest source of possible contamination:</b>					
1 Septic tank		4 Lateral lines		10 Livestock pens	
2 Sewer lines		5 Cess pool		⑪ Fuel storage	
3 Watertight sewer lines		6 Seepage pit		12 Fertilizer storage	
		7 Pit privy		13 Insecticide storage	
		8 Sewage lagoon		How many feet? _____	
		9 Feedyard		14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below) _____	
<b>Direction from well?</b>					
FROM		TO		PLUGGING INTERVALS	
0		10'		Topsoil, clay w/silt & gravel	
10'		40'		dark brown silt, brown	
40'		120'		silt w/clay, brown	
120'		130'		sand, w/clay matrix white	
130'		148'		sand med to coarse white some clay	
148'		158'		clay some fine sand white	
158'		168'		clay w/fine sand light brown	
168'		310'		sand med to coarse light brown	
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>6-23-94</u> and this record is true to the best of my knowledge and belief. Kansas Water Contractor's License No. <u>438</u> This Water Well Record was completed on (mo/day/yr) <u>8/31/94</u> under the business name of <u>Kansas City Testing Lab - Inc.</u> by (signature) <u>[Signature]</u>					
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 Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					