

Division of Water  
Resources App. No.

☒ Original Record    ☐ Correction    ☐ Change in Well Use

Well ID

<b>1 LOCATION OF WATER WELL:</b> County: Cloud		Fraction NE ¼ SE ¼ SW ¼ NW ¼ 15		Township Number T 5 S		Range Number R 1 E W																																																													
<b>2 WELL OWNER:</b> Last Name: Lambert First: Patrick Business: Address: 2715 Union Road Address: City: Clyde State: KS ZIP: 66938		Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: <input type="checkbox"/> Approximately 2,400 feet southeast of the intersection of Vale Rd and 270th Rd																																																																	
<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N <table border="1" style="width:100%; height: 100px; text-align: center;"> <tr> <td colspan="2">NW</td> <td colspan="2">NE</td> </tr> <tr> <td colspan="2">X</td> <td colspan="2"></td> </tr> <tr> <td colspan="2">SW</td> <td colspan="2">SE</td> </tr> </table> S ----- 1 mile -----		NW		NE		X				SW		SE		<b>4 DEPTH OF COMPLETED WELL:</b> 199 ft. Depth(s) Groundwater Encountered: 1) 56 ft. 2) _____ ft. 3) _____ ft. or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: 56 ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 04/21/2015 <input type="checkbox"/> above land surface, measured on (mo-day-yr) _____ Pump test data: Well water was 122 ft. after 2 hours pumping 800 gpm Well water was _____ ft. after _____ hours pumping _____ gpm Estimated Yield: 800 gpm Bore Hole Diameter: 30 in. to 199 ft. and _____ in. to _____ ft.		<b>5 Latitude:</b> 39.6195 (decimal degrees) <b>Longitude:</b> 97.420611 (decimal degrees) Datum: <input type="checkbox"/> WGS 84 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input type="checkbox"/> GPS (unit make/model: _____) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: _____																																																			
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<b>7 WELL WATER TO BE USED AS:</b> 1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock <input checked="" type="checkbox"/> Irrigation 2. <input type="checkbox"/> Feedlot 3. <input type="checkbox"/> Industrial 5. <input type="checkbox"/> Public Water Supply: well ID _____ 6. <input type="checkbox"/> Dewatering: how many wells? _____ 7. <input type="checkbox"/> Aquifer Recharge: well ID _____ 8. <input type="checkbox"/> Monitoring: well ID _____ 9. Environmental Remediation: well ID _____ <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection		10. <input type="checkbox"/> Oil Field Water Supply: lease _____ 11. Test Hole: well ID _____ <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? _____ a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify): _____																																																																	
<b>Was a chemical/bacteriological sample submitted to KDHE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted: _____ Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																																																			
<b>8 TYPE OF CASING USED:</b> <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other _____ CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter 16 in. to 139 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft. Casing height above land surface 12 in. Weight _____ lbs./ft. Wall thickness or gauge No. 625 <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole) <b>SCREEN OR PERFORATION OPENINGS ARE:</b> <input checked="" type="checkbox"/> Continuous Slot <input type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole) <b>SCREEN-PERFORATED INTERVALS:</b> From 139 ft. to 199 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. <b>GRAVEL PACK INTERVALS:</b> From 20 ft. to 134 ft., From 139 ft. to 199 ft., From _____ ft. to _____ ft.																																																																			
<b>9 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ Grout Intervals: From 0 ft. to 20 ft., From 134 ft. to 139 ft., From _____ ft. to _____ ft. <b>Nearest source of possible contamination:</b> <input type="checkbox"/> Septic Tank <input type="checkbox"/> Lateral Lines <input type="checkbox"/> Pit Privy <input checked="" type="checkbox"/> Livestock Pens <input type="checkbox"/> Insecticide Storage <input type="checkbox"/> Sewer Lines <input type="checkbox"/> Cess Pool <input type="checkbox"/> Sewage Lagoon <input type="checkbox"/> Fuel Storage <input type="checkbox"/> Abandoned Water Well <input type="checkbox"/> Watertight Sewer Lines <input type="checkbox"/> Seepage Pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer Storage <input type="checkbox"/> Oil Well/Gas Well <input type="checkbox"/> Other (Specify) _____ Direction from well? West Distance from well? 1400 ft.																																																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">10 FROM</th> <th style="width:10%;">TO</th> <th style="width:40%;">LITHOLOGIC LOG</th> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:20%;">LITHO. LOG (cont.) or PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>20</td> <td>Top soil</td> <td></td> <td></td> <td></td> </tr> <tr> <td>20</td> <td>70</td> <td>Brown clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>70</td> <td>124</td> <td>Gray shale</td> <td></td> <td></td> <td></td> </tr> <tr> <td>124</td> <td>140</td> <td>Fine sandstone</td> <td></td> <td></td> <td></td> </tr> <tr> <td>140</td> <td>160</td> <td>Fine sandstone w/gray shale strips</td> <td></td> <td></td> <td></td> </tr> <tr> <td>160</td> <td>196</td> <td>Fine sandstone</td> <td></td> <td></td> <td></td> </tr> <tr> <td>196</td> <td>200</td> <td>Shale</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3"></td> <td colspan="3" rowspan="3" style="vertical-align: top;"> <b>Notes:</b>            _____            _____            _____         </td> </tr> <tr> <td colspan="3"></td> </tr> <tr> <td colspan="3"></td> </tr> </tbody> </table>								10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS	0	20	Top soil				20	70	Brown clay				70	124	Gray shale				124	140	Fine sandstone				140	160	Fine sandstone w/gray shale strips				160	196	Fine sandstone				196	200	Shale							<b>Notes:</b> _____ _____ _____								
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<b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) 04/21/2014 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 755 This Water Well Record was completed on (mo-day-year) 05/19/2015 under the business name of Sargent Drilling																																																																			