

1 LOCATION OF WATER WELL  
 County: **Graham** Fraction **NW 1/4 SW 1/4 SW 1/4** Section Number **31** Township Number **T 6 S** Range Number **R 24 E/W**

Distance and direction from nearest town or city? **7N 1 1/2 3N Morland, Ks** Street address of well if located within city?

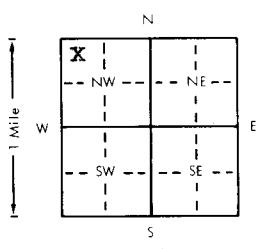
2 WATER WELL OWNER: **Vuell Minium**  
 RR#, St. Address, Box # :  
 City, State, ZIP Code **Morland, Kansas** Board of Agriculture, Division of Water Resources Application Number:

3 DEPTH OF COMPLETED WELL: **217** ft. Bore Hole Diameter: **28** in. to 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 12 Other (Specify below)  
 7 Lawn and garden only 10 Observation well  
 Well's static water level **135** ft. below land surface measured on **6** month **24** day **78** year  
 Pump Test Data : Well water was **217** ft. after **5** hours pumping **700** gpm  
 Est. Yield **700** gpm: Well water was ft. after hours pumping gpm

4 TYPE OF BLANK CASING USED:  
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued Clamped  
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded **X**  
 7 Fiberglass Threaded  
 Blank casing dia **16** in. to ft., Dia in. to ft., Dia in. to ft.  
 Casing height above land surface **12** in., weight lbs./ft. Wall thickness or gauge No **188**  
 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 Saw cut 11 None (open hole)  
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes  
 7 Torch cut 10 Other (specify)  
 Screen-Perforation Dia **16** in. to ft., Dia in. to ft., Dia in. to ft.  
 Screen-Perforated Intervals: From **187** ft. to **247** ft. From ft. to ft. From ft. to ft.  
 Gravel Pack Intervals: From **10** ft. to **247** ft. From ft. to ft. From ft. to ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other  
 Grouted Intervals: From **0** ft. to **10** ft. From ft. to ft. From ft. to ft. From ft. to ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well  
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well  
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)  
 13 Watertight sewer lines **none**  
 Direction from well How many feet ? Water Well Disinfected? Yes No  
 Was a chemical/bacteriological sample submitted to Department? Yes No **X** If yes, date sample was submitted month day year: Pump Installed? Yes No **no**  
 If Yes: Pump Manufacturer's name Model No. HP Volts  
 Depth of Pump Intake ft. Pumps Capacity rated at gal./min.  
 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on **6** month **24** day **78** year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **214**  
 This Water Well Record was completed on **7** month **23** day **80** year under the business name of **Blue Jay Drilling CO. Inc.** by (signature) *[Signature]*

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	105	top soil	180	190
	105	115	fine sand m. gravel	190	200	fine sand
	115	125	f. one sand	200	210	f. sand m. gravel loose
	125	135	fine sand sandy clay	210	220	ochre shale
	135	140	fine sand sandy clay			
	140	145	fine sand s. clay s. stone			
	145	150	fine sand m. frav. s. clay			
	150	160	f. sand			
	160	165	f. sand sandy clay			
	165	175	f. sands. clay m. gravel			
ELEVATION:	175	180	f. sand med. gravel			

Depth(s) Groundwater Encountered **1. 135** ft. 2. 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.