

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Thomas</u>		<u>NW 1/4 NE 1/4 SE 1/4</u>	<u>2</u>	<u>T 2 S</u>	<u>R 31 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>N. Main Street</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # :		Application Number:			
City, State, ZIP Code :		<u>Rexford, KS 67753</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>101</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>Dry</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:		5 Public water supply    8 Air conditioning    11 Injection well 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 _____; If yes, mo/day/yr sample was submitted		Water Well Disinfected? Yes _____ No _____			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued _____ Clamped _____			
① Steel    3 RMP (SR) 2 PVC    4 ABS		5 Wrought iron    6 Asbestos-Cement    7 Fiberglass 8 Concrete tile    9 Other (specify below)    Welded _____ Threaded _____			
Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft.		Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. _____			
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC    10 Asbestos-cement			
1 Steel    3 Stainless steel    5 Fiberglass    8 RMP (SR) 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-PERFORATED INTERVALS:			
GRAVEL PACK INTERVALS:		From _____ ft. to _____ ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.			
6 GROUT MATERIAL:		4 Other _____			
1 Neat cement    2 Cement grout    ③ Bentonite Grout Intervals: 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 Livestock pens    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) <u>None</u> 13 Insecticide storage		Direction from well? _____ How many feet? _____			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
					<u>Removed Pad + 4'</u> <u>casing</u> <u>Clay-Sand mix</u> <u>Bentonite</u> <u>Top Soil</u>
			<u>101</u>	<u>6</u>	
			<u>6</u>	<u>2</u>	
			<u>2</u>	<u>0</u>	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>6-6-89</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) <u>6-7-89</u> under the business name of _____ by (signature) <u>Keith R. Ramey</u>					