

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Thomas		NW 1/4 SW 1/4 NW 1/4	5	T 7 S	R 31 W E/W
Distance and direction from nearest town or city street address of well if located within city?					
N/A - LOCATION CONFIRMED BY GMD #4					
2 WATER WELL OWNER: Leo W. Keller		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # : 522 Center		Application Number:			
City, State, ZIP Code : Oakley KS 67748					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL..... ft. ELEVATION: .....			
		Depth(s) Groundwater Encountered 1..... ft. 2..... ft. 3..... ft.			
		WELL'S STATIC WATER LEVEL..... 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 <input checked="" type="checkbox"/> 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.....			
<input checked="" type="checkbox"/> Steel      3 RMP (SR) 2 PVC      4 ABS		5 Wrought iron      8 Concrete tile      Welded..... 6 Asbestos-Cement      9 Other (specify below)      Threaded.....			
Blank casing diameter..... in. to..... ft., Dia..... 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)      11 Other (specify)..... 2 Brass      4 Galvanized steel      6 Concrete tile      9 ABS      12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped      8 Saw cut      11 None (open hole) 1 Continuous slot      3 Mill slot      6 Wire wrapped      9 Drilled holes 2 Louvered shutter      4 Key punched      7 Torch cut      10 Other (specify).....			
SCREEN-PERFORATED INTERVALS: From..... ft. to..... ft., From..... ft. to..... ft.					
GRAVEL PACK INTERVALS: From..... ft. to..... ft., From..... ft. to..... ft.					
6 GROUT MATERIAL: 1 Neat cement      2 Cement grout      3 Bentonite      4 Other.....					
Grout Intervals: From..... ft. to..... ft., From..... ft. to..... ft., From..... ft. to..... ft.					
What is the nearest source of possible contamination:		10 Livestock pens      14 Abandoned water well 1 Septic tank      4 Lateral lines      7 Pit privy      11 Fuel storage      15 Oil well/Gas well 2 Sewer lines      5 Cess pool      8 Sewage lagoon      12 Fertilizer storage      16 Other (specify below) 3 Watertight sewer lines      6 Seepage pit      9 Feedyard      13 Insecticide storage			
Direction from well?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
	ENTER		120	10	blockage in casing
			10	04	cement
			04	0	dist
		PLUGGING			Removed Cement + Casing 4' of
		INFORMATION			RECEIVED
		AT			NOV 30 1989
		RIGHT			DIVISION OF ENVIRONMENT
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) 9-24-89 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) by (signature) Dale H. Sunway					

OFFICE USE ONLY

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SEC.

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