

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Thomas</u>		$\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	<u>21</u>	T <u>7</u> S	R <u>32</u> EW
Distance and direction from nearest town or city street address of well if located within city? <u>In Gem 98</u>					
2 WATER WELL OWNER: <u>Maye Coon Estate C/O Ruth Higera.</u>					
RR#, St. Address, Box #: <u>Box 4</u>					
City, State, ZIP Code: <u>Coon, KS 67734</u>					
Board of Agriculture, Division of Water Resources Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>135</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>128</u> ft. below land surface measured on mo/day/yr <u>2-27-90</u>			
		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:			
		<input checked="" type="checkbox"/> 1 Domestic <input type="checkbox"/> 3 Feedlot <input type="checkbox"/> 6 Oil field water supply <input type="checkbox"/> 9 Dewatering <input type="checkbox"/> 12 Other (Specify below)			
		<input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 4 Industrial <input type="checkbox"/> 7 Lawn and garden only <input type="checkbox"/> 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:					
<input checked="" type="checkbox"/> 1 Steel <input type="checkbox"/> 3 RMP (SR) <input type="checkbox"/> 5 Wrought iron <input type="checkbox"/> 8 Concrete tile CASING JOINTS: Glued Clamped					
<input type="checkbox"/> 2 PVC <input type="checkbox"/> 4 ABS <input type="checkbox"/> 6 Asbestos-Cement <input type="checkbox"/> 9 Other (specify below) Welded					
<input type="checkbox"/> 7 Fiberglass Threaded					
Blank casing diameter <u>5 1/2</u> in. to ft., Dia in. to ft., Dia in. to ft.					
Casing height above land surface <u>6</u> Below Pit level in., weight lbs./ft. Wall thickness or gauge No.					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
<input type="checkbox"/> 1 Steel <input type="checkbox"/> 3 Stainless steel <input type="checkbox"/> 5 Fiberglass <input type="checkbox"/> 8 RMP (SR) <input type="checkbox"/> 11 Other (specify)					
<input type="checkbox"/> 2 Brass <input type="checkbox"/> 4 Galvanized steel <input type="checkbox"/> 6 Concrete tile <input type="checkbox"/> 9 ABS <input type="checkbox"/> 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
<input type="checkbox"/> 1 Continuous slot <input type="checkbox"/> 3 Mill slot <input type="checkbox"/> 5 Gauzed wrapped <input type="checkbox"/> 8 Saw cut <input type="checkbox"/> 11 None (open hole)					
<input type="checkbox"/> 2 Louvered shutter <input type="checkbox"/> 4 Key punched <input type="checkbox"/> 6 Wire wrapped <input type="checkbox"/> 9 Drilled holes					
<input type="checkbox"/> 7 Torch cut <input type="checkbox"/> 10 Other (specify)					
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.					
From ft. to ft., From ft. to ft.					
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.					
From ft. to ft., From ft. to ft.					
6 GROUT MATERIAL:					
<input type="checkbox"/> 1 Neat cement <input checked="" type="checkbox"/> 2 Cement grout <input checked="" type="checkbox"/> 3 Bentonite <input type="checkbox"/> 4 Other					
Grout Intervals: From <u>117</u> ft. to <u>114</u> ft., From <u>10</u> ft. to <u>0</u> ft., From <u>5</u> ft. to <u>0</u> ft.					
What is the nearest source of possible contamination:					
<input type="checkbox"/> 1 Septic tank <input type="checkbox"/> 4 Lateral lines <input type="checkbox"/> 7 Pit privy <input type="checkbox"/> 11 Fuel storage <input type="checkbox"/> 15 Oil well/Gas well					
<input type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 5 Cess pool <input type="checkbox"/> 8 Sewage lagoon <input type="checkbox"/> 12 Fertilizer storage <input type="checkbox"/> 16 Other (specify below)					
<input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 9 Feedyard <input checked="" type="checkbox"/> 10 Livestock pens <input type="checkbox"/> 14 Abandoned water well					
Direction from well? <u>100' west</u>					
FROM		TO		PLUGGING INTERVALS	
				washed sand	
				clay	
				Bentonite	
				clay	
				Bentonite	
				clay	
				(Pit floor) cement grout	
<div style="border: 2px solid black; padding: 5px; display: inline-block;">RECEIVED</div>					
MAR 05 1990					
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>2-27-90</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>2-27-90</u>					
under the business name of by (signature) <u>Don Coon</u>					

OFFICE USE ONLY

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EW

SEC.

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