

1 LOCATION OF WATER WELL: County: Sherman	Fraction SE 1/4 SE 1/4 SW 1/4	Section Number 20	Township Number T 8 S	Range Number R 42 E (W)
Distance and direction from nearest town or city street address of well if located within city? Approximately 666' east of the intersection of Lamborn Street and Locust Street in Kanorado		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: 39.33787 Longitude: -102.033142 Elevation: Unknown Datum: NAD83 Data Collection Method: WAAS GPS Unit		
2 WATER WELL OWNER: City of Kanorado RR#, St. Address, Box # : 404 Center City, State, ZIP Code : P.O. Box 68 Kanorado, KS 67741				

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W E S	<p>4 DEPTH OF COMPLETED WELL 243 ft.</p> <p>Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.</p> <p>WELL'S STATIC WATER LEVEL 156 ft. below land surface measured on mo/day/yr 01-23-08</p> <p>Pump test data: Well water was Not checked ft. after _____ hours pumping _____ gpm</p> <p>Est. Yield Unknown gpm: Well water was _____ ft. after _____ hours pumping _____ gpm</p> <p>WELL WATER TO BE USED AS: (5) Public water supply 8 Air conditioning 11 Injection well</p> <p>1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)</p> <p>2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well</p> <p>Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr _____</p> <p>Sample was submitted _____ Water well disinfected? Yes <input checked="" type="checkbox"/> No _____</p>
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5 TYPE OF CASING USED:	5 Wrought Iron 8 Concrete tile 1 Steel 3 RMP (SR) 6 Asbestos-Cement (9) Other (specify below) (2) PVC 4 ABS 7 Fiberglass Stainless Steel	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____ Welded <input checked="" type="checkbox"/> Threaded _____
Blank casing diameter 12 (PVC) in. to 0-203 ft., Diameter 12 (SS) in. to 239-242 ft., Diameter _____ in. to _____ ft.		
Casing height above land surface 12 in., weight PVC 18.07/SS 49.56 lbs./ft. Wall thickness or gauge No. PVC .75/SS.375		
TYPE OF SCREEN OR PERFORATION MATERIAL:		
1 Steel (3) Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) _____ 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)		
SCREEN OR PERFORATION OPENINGS ARE:		
(1) Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (Specify) _____		
SCREEN-PERFORATED INTERVALS: From 203 ft. to 239 ft., From _____ ft. to _____ ft.		
GRAVEL PACK INTERVALS: From 173 ft. to 244 ft., From _____ ft. to _____ ft.		

6 GROUT MATERIAL:	1 Neat Cement (2) Cement grout 3 Bentonite (4) Other 50% Bentonite Holeplug/50% Sand Bentonite Holeplug	
Grout Intervals: From _____ ft. to 7-51 ft., From 153-173 ft. to _____ ft., From 51-153 ft. to _____ ft.		
What is the nearest source of possible contamination:		
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage (16) Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well None known		
Direction from well? _____		How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	Topsoil	139	142	Clay, tan and white
5	42	Clay, brown	142	159	Sand and gravel, fine, medium, with cemented sand
42	50	Sand and gravel, fine, medium, with clay streaks	159	199	Cemented sand, hard, and sandstone
50	82	Sand and gravel, fine, medium, coarse	199	203	Clay and cemented sand streaks
82	86	Clay, brown	203	239	Sand and gravel, fine, medium, with some clay
86	92	Sand and gravel, fine, medium	239	244	Clay, yellow and brown
92	95	Clay, brown			
95	98	Sand and gravel, fine, medium, with clay streaks			
98	105	Clay, brown			
105	139	Sand and gravel, fine, medium, with clay streaks			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed (3) plugged under my jurisdiction and was completed on (mo/day/year) 01-23-08 and this record is true to the best of my knowledge and belief.	
Kansas Water Well Contractor's License No. 771	This Water Well Record was completed on (mo/day/year) 2-8-08
Under the business name of Clarke Well & Equipment, Inc.	by (signature) <i>[Signature]</i>

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, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.