

1 LOCATION OF WATER WELL County: <u>Rooks</u>	Fraction <u>NE</u> 1/4 <u>NE</u> 1/4 <u>SE</u> 1/4	Section Number <u>29</u>	Township Number <u>T 9 S</u>	Range Number <u>R 18 E/W</u>
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Distance and direction from nearest town or city?
2 West 1/2 North of Plainville

Street address of well if located within city?

2 WATER WELL OWNER: Virgil Sneath
 RR#, St. Address, Box #: R. R. 1
 City, State, ZIP Code: Plainville, Kansas 67663

Board of Agriculture, Division of Water Resources
 Application Number:

3 DEPTH OF COMPLETED WELL: 75 ft. Bore Hole Diameter: 9 in. to _____ ft., and _____ in. to _____ ft.

Well Water to be used as: 1

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: 45 ft. below land surface measured on September month 14 day 1979 year

Pump Test Data: Well water was 45 ft. after _____ hours pumping _____ gpm

Est. Yield 25 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED: 2

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	Casing Joints: <u>X</u> Glued _____ Clamped _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass		Threaded _____

Blank casing dia 5 in. to 65 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface: 36 in., weight 200 lbs./ft. Wall thickness or gauge No. .26

5 TYPE OF SCREEN OR PERFORATION MATERIAL: 7

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)

6 Screen or Perforation Openings Are: 8

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)	

7 Screen-Perforation Dia: 5 in. to 75 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

8 Screen-Perforated Intervals: From 65 ft. to 75 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

9 Gravel Pack Intervals: From 50 ft. to 75 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

10 GROUT MATERIAL: 1 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.

11 What is the nearest source of possible contamination: NONE

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	<u>NONE</u>

Direction from well _____ How many feet _____ ? Water Well Disinfected? Yes X No _____

12 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No X

Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____

13 Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ gal. min.

14 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other _____

15 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on September month 14 day 1979 year

16 I and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 199

17 This Water Well Record was completed on July month 21 day 1980 year under the business name of Karst Water Well Service by (signature) M B Karst

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		TO		LITHOLOGIC LOG		FROM		TO		LITHOLOGIC LOG	
	0	3	30	68	Topsoil							
	3	30	30	68	Clay							
	30	68	68	72	Fine sand with clay							
	68	72	72	75	Medium gravel							
	72	75			Blue shale							

18 Depth(s) Groundwater Encountered 1. 68 ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)

19 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.

OFFICE USE ONLY
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E/W
SEC.
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NE 1/4
NE 1/4
SE 1/4