

1 LOCATION OF WATER WELL  
 County: Hraham Fraction DAD Section Number 25 Township Number T 9 S Range Number R 25 EW  
SE 1/4 NE 1/4 SE 1/4

Distance and direction from nearest town or city? 3 N, 2 E of St. Peter  
 Street address of well if located within city?

2 WATER WELL OWNER: Slawson Drilling ST. PETER  
 RR#, St. Address, Box #: Box 1131  
 City, State, ZIP Code: Great Bend, Ks. 67530  
 Board of Agriculture, Division of Water Resources  
 Application Number: T80-260

3 DEPTH OF COMPLETED WELL: ..... ft. Bore Hole Diameter: ..... in. to ..... ft., and ..... in. to ..... ft.  
 Well Water to be used as:  
 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 ..... ft. below land surface measured on ..... month ..... day ..... year  
 Pump Test Data : Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

4 TYPE OF BLANK CASING USED:  
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued ..... Clamped .....  
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded .....  
 7 Fiberglass Threaded .....  
 Blank casing dia ..... 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:  
 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement  
 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-Perforation Dia ..... in. to ..... ft. Dia ..... in. to ..... ft. Dia ..... in. to ..... ft.  
 Screen-Perforated Intervals: 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.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....  
 Grouted Intervals: From ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 What is the nearest source of possible contamination:  
 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  
 Direction from well ..... How many feet ..... ? Water Well Disinfected? Yes ..... No .....  
 Was a chemical/bacteriological sample submitted to Department? Yes ..... No ..... If yes, date sample  
 was submitted ..... month ..... day ..... year: Pump Installed? Yes ..... No .....  
 If Yes: Pump Manufacturer's name ..... Model No. .... HP ..... Volts .....  
 Depth of Pump Intake ..... ft. Pumps Capacity rated at ..... gal./min.  
 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was  
 completed on ..... 5 ..... month ..... 20 ..... 80 ..... day ..... 80 ..... year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134  
 This Water Well Record was completed on ..... 4 ..... month ..... 4 ..... day ..... 80 ..... year under the business  
 name of Rosenkrantz-Bemis by (signature) Lora Dodson

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Top soil	107	120	Brown clay
3	38	Brown clay	120	127	Sand + gravel
38	46	Sand + gravel	127	135	Streak of sand + clay
46	53	Brown clay	135	138	Sand + gravel
53	62	Sand + gravel	138	145	White chaly hard rock
62	70	Brown clay + sand streaks	NOT	TO PROX	hard rock
70	78	hard white rock			
78	85	sand + gravel			
85	86	hard streak			
86	107	Sand + gravel			

Well was plugged with well cuttings + gravel pack

Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft. 4. .... ft. (Use a second sheet if needed) 2563

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  
T  
9  
R  
95-  
EW  
SEC  
95  
SE 1/4  
NE 1/4  
SE 1/4