

OFFICE USE ONLY T R EW SEC

1 LOCATION OF WATER WELL	Fraction NW 1/4 Se 1/4 SE 1/4	Section Number 25	Township Number T 9 S	Range Number R 30 EW
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County: **Sheridan** Distance and direction from nearest town or city? **Sequin 6 3/4 South, 1 1/4 West** Street address of well if located within city? **N/A**

2 WATER WELL OWNER: **Charles Schwarz**
 RR#, St. Address, Box #: **Grinnell, Kansas** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **Grinnell, Kansas** Application Number: **32,059**

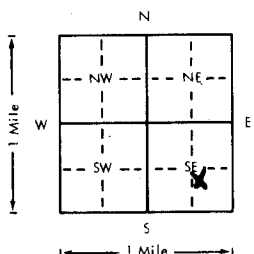
3 DEPTH OF COMPLETED WELL: **202** ft. Bore Hole Diameter: **30** in. to **202** ft., and _____ in. to _____ ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 7 Lawn and garden only 10 Observation well
 Well's static water level **.88** ft. below land surface measured on _____ 9 month _____ 3 day 1980 year
 Pump Test Data: Well water was **185** ft. after _____ 6 hours pumping. **.525** gpm
 Est. Yield **550** 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 **X** _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **X** _____ in., weight _____ lbs./ft. Wall thickness or gauge No. **.188**
 TYPE OF SCREEN OR PERFORATION MATERIAL **X**
 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) _____
 Screen or Perforation Openings Are: **X**
 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 **112 W A Brown** ft. to **172** ft., From **182** ft. to **202** ft.
 From **172 Johnson** ft. to **182** ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From **10** ft. to **202** ft., 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 **Concrete**
 Grouted Intervals: From **0** ft. to **10** 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 **West** How many feet **1500** ? Water Well Disinfected? Yes _____ No **X**
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X** If yes, date sample was submitted _____ month _____ day _____ year Pump Installed? Yes **X** No _____
 If Yes: Pump Manufacturer's name **Floway** Model No. **8 st 10 DOH** HP _____ Volts _____
 Depth of Pump Intake **200** ft. Pumps Capacity rated at **550** 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 _____ 9 month _____ 2 day 1980 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ 245 This Water Well Record was completed on _____ 10 month _____ 6 day 1980 year under the business name of **Western Well and Pump** by (signature) *Roy E. Senior Jr*

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	34	Clay	119	127
	34	48	Sand and Gravel	127	142	Clay
	48	53	Clay	142	149	Coarse sand and gravel
	53	59	Gravel	149	160	Clay & Streaks of Coarse S
	59	82	Clay and Sand Mix	160	164	Coarse sand & gravel
	82	93	Gravel	164	166	Cemented Sand
	93	99	Clay	166	183	Coarse sand & Gravel
	99	103	Gravel	183	195	White Sand
	103	107	Cemented Sand	195	200	Med Sand
	107	116	Coarse Sand & Gravel	200		Ochre & Shale
ELEVATION:	116	119	Clay & Cement Streaks			



Depth(s) Groundwater Encountered **1.100** ft. 2 _____ ft. 3 _____ ft. 4 _____ ft. (Use a second sheet if needed)

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.