

1 LOCATION OF WATER WELL
 County: Shawnee Fraction: SW 1/4 SW 1/4 SW 1/4 Section Number: 19 Township Number: T 10 S Range Number: R 15 EW

Distance and direction from nearest town or city? 1/2 N .3 W OF ELMONT Street address of well if located within city? 7350 NW. 75

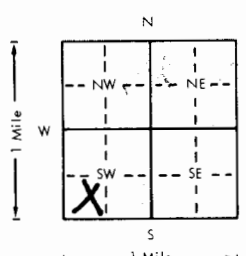
2 WATER WELL OWNER: Lloyd Becker * El Becker
 RR#, St. Address, Box #: 7929 Rochester Rd 7350 NW. 75
 City, State, ZIP Code: Topeka 66618 Board of Agriculture, Division of Water Resources
 Application Number: _____

3 DEPTH OF COMPLETED WELL: 38 ft. Bore Hole Diameter: 8 in. to _____ ft., and _____ in. to _____ ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 11 Injection well
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well 12 Other (Specify below)
 Well's static water level: 32 ft. below land surface measured on December month 19 day 1979 year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 40 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: 5 in. to 28 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface: 29 in., weight 2.87 lbs./ft. Wall thickness or gauge No. .250
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 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:
 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: 5 in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 28 ft. to 38 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 Gravel Pack Intervals: X From 10 ft. to 38 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 0 ft. to 10 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Sepsis tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 15 Oil well/Gas well
 3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines 16 Other (specify below) _____
 Direction from well: North How many feet: 250 ? 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 December month 14 day 1979 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 182
 This Water Well Record was completed on December month 18 day 1979 year under the business name of STRADER DRIG CO INC by (signature) Dale Ashen

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


FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	6	top soil			
6	31	Clay			
31	32	Limestone, water bearing			
32	36	Shale			

 ELEVATION: 962 ft

Depth(s) Groundwater Encountered 1. 32 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.

OFFICE USE ONLY
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