

1 LOCATION OF WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Johnson</u>		<u>SE 1/4 SW 1/4 NW 1/4</u>	<u>9</u>	<u>T 12 S</u>	<u>R 25 0 NW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>5390 Johnson - Immediately east of this address</u>					
2 WATER WELL OWNER:		MW 3 44046163			
RR#, St. Address, Box # :		Board of Agriculture, Division of Water Resources			
City, State, ZIP Code :		Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>14</u> ft. ELEVATION: _____			
		Depth(s) Groundwater Encountered 1. <u>8</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield _____ gpm Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter _____ 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 Monitoring well 12 Other (Specify below)			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>(X)</u> If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes _____ No <u>(X)</u>			
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 2 PVC <u>(X)</u> 4 ABS 7 Fiberglass 9 Other (specify below) Welded _____ Threaded <u>(X)</u>					
Blank casing diameter _____ 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 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 <u>3</u> Mil 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-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement 2 <u>(X)</u> Cement grout 3 Bentonite 4 Other _____ Grout 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 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) <u>4515</u> 13 Insecticide storage					
Direction from well? _____ How many feet? _____					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	6"	Asphalt			
3	5	Clay, silty, dk Bm, orange mottles			
6	8	Clay, silty, dk Bm, orange mottles			
Blushmount waiver by Don Taylor					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>2/24/97</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>483</u> This Water Well Record was completed on (mo/day/yr) <u>3/15/97</u> under the business name of <u>TEST</u> by (signature) <u>Bob Johnson</u>					