

241

481

1 LOCATION OF WATER WELL
 County: Shawnee Fraction: SE 1/4 SE 1/4 NE 1/4 Section Number: 29 Township Number: T 13 S Range Number: R 14 EW
 Distance and direction from nearest town or city: 1/2 S E of 1/2 Street address of well if located within city? Auburn 25

2 WATER WELL OWNER: Mildred Baxter
 RR#, St. Address, Box #: 7946 S.W. 93 rd Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Topeka, KS 66601 Application Number:

3 DEPTH OF COMPLETED WELL 138 ft. Bore Hole Diameter: 10 in. to _____ ft., and _____ in. to _____ ft.
 Well Water to be used as:
 1 Domestic 1 3 Feedlot 6 Oil field water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 7 Lawn and garden only 9 Dewatering 12 Other (Specify below)
 10 Observation well
 Well's static water level: 25 ft. below land surface measured on JAN. month 20 day 81 year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield: 30 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 0-23 ft., Dia: 5 in. to 33-95 ft., Dia: 5 in. to 100-138 ft.
 Casing height above land surface: 29 in., weight: 2.84 lbs./ft. Wall thickness or gauge No. .258

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 8 RMP (SR) 11 Other (specify) _____
 9 ABS 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 23 ft. to 33 ft., From _____ ft. to _____ ft.
 From 95 ft. to 100 ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 14 ft. to 138 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 _____
 Grouted Intervals: From 4 ft. to 14 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: NE How many feet: 90 ? 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: Jacuzzi Model No. 554B-52 HP 1/2 Volts 230
 Depth of Pump Intake _____ ft. Pumps Capacity rated at 10 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 JANUARY month 23 day 1981 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 JANUARY month 23 day 1981 year under the business name of STRADER DRIG. CO. INC. by (signature) Dale Cochran

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	TOP SOIL			
3	25	CLAY, BROWN			
25	27	CHERTY, LIMESTONE, GRAVEL			
27	34	LIMESTONE, GREY			
34	69	SHALE, GREY			
69	71	LIMESTONE, GREY			
71	138	SHALE, GREY			

ELEVATION: 1029 ft.

Depth(s) Groundwater Encountered 1. 27 ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)

OFFICE USE ONLY T 13 R 14 EW SEC. 14 SE 1/4 SE 1/4

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.