

1 LOCATION OF WATER WELL
 County: Morris Fraction: NW 1/4 NE 1/4 NE 1/4 Section Number: 16 Township Number: T 14 S Range Number: R 8 E

Distance and direction from nearest town or city? 1/4 mi on south side Dwight road east Street address of well if located within city? 4 Southon South Side road

2 WATER WELL OWNER: EVERETT Jammeman Everett Jammeman
 RR#, St. Address, Box #: RR City, State, ZIP Code: Alta Vista KS 66834 Board of Agriculture, Division of Water Resources Application Number:

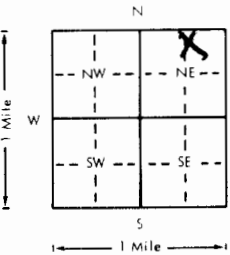
3 DEPTH OF COMPLETED WELL: 110 ft. Bore Hole Diameter: 9 in. to 15 ft., and 6 1/2 in. to 110 ft.
 Well Water to be used as:
 Domestic 3 Feedlot 6 Oil field water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 7 Lawn and garden only 9 Dewatering 10 Observation well 12 Other (Specify below)
 Well's static water level: 60 ft. below land surface measured on 2 month 26 day 1981 year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 20 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Casing Joints: Glued Clamped Welded
 2 PVC 4 ABS 7 Fiberglass 10 Asbestos-cement 11 Other (specify) 12 None used (open hole) Threaded
 Blank casing dia: 5 in. to 110 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. 267 Wall

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) _____
 12 None used (open hole)
 Screen or Perforation Openings Are: .040
 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 10 Other (specify) _____
 Screen-Perforation Dia: 5 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 110 ft. to 30 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 110 ft. to 15 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 15 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: Cow lot
 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) Cow lot
 13 Watertight sewer lines
 Direction from well: West How many feet: 75 ? 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 2 month 26 day 81 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 237
 This Water Well Record was completed on 2 month 28 day 81 year under the business name of Strader Drilling Co by (signature) Harold Strader

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

 FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG
Casing Pulley From old well 104 fld cap
104 110 Rock limestone white

ELEVATION: Depth(s) Groundwater Encountered 1.100 to 1.05' 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
T
14
R
8
EW
SEC
10
NW 1/4
NE 1/4
SE 1/4