

1 LOCATION OF WATER WELL
 County: Morris Fraction: NW 1/4 NW 1/4 NW 1/4 Section Number: 20 Township Number: T 14 S Range Number: R 8 EA

Distance and direction from nearest town or city? Dwight 1 mile east
1 1/4 miles South on east side of Road Street address of well if located within city?

2 WATER WELL OWNER: Don Eisenhult
 RR#, St. Address, Box #: Dwight Kansas 66849
 City, State, ZIP Code: Dwight Kansas 66849
 Board of Agriculture, Division of Water Resources Application Number:

3 DEPTH OF COMPLETED WELL: 80 ft. Bore Hole Diameter: 10 in. to 15 ft., and 6 1/2 in. to 80 ft.
 Well Water to be used as:
 1 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 12 Other (Specify below)
 10 Observation well
 Well's static water level: 26 ft. below land surface measured on Dec Nov, month 22 day 1980 year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 1 1/2 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)
 2 PVC 4 ABS 7 Fiberglass
 Casing Joints: Glued Clamped _____
 Welded _____
 Threaded _____
 Blank casing dia: 5 in. to 40 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 12 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 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 80 ft. to 40 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: none 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 15 ft. to 5 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: livestock pens
 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: South How many feet: 150? 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: N.A. 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: Nov 22 month Nov day 1980 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: Dec month 2nd day 1980 year under the business name of Strader Drilling Co by (signature) Harold Strader

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	5	top Soil, Black			
	5	16	Clay, yellow			
	16	28	Rock, lime yellow (water)			1 1/2 GPM
	28	60	Shale, Blue			
	60	75	Rock, lime white			
ELEVATION:	75	80	Shale, Blue			

Depth(s) Groundwater Encountered 1. 26 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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R
8
EW
SEC
20
NW 1/4
NW 1/4
NW 1/4