

LOCATION OF WATER WELL
 County: Douglas Fraction SE 1/4 NE 1/4 Section Number 3 Township Number T 15 S Range Number R 19 E

Distance and direction from nearest town or city? 1/2 West Baldwin Street address of well if located within city?

WATER WELL OWNER: Rural Dist. 2, Well #11
 RR#, St. Address, Box #: R.R. #2
 City, State, ZIP Code: Baldwin, Kansas 66006
 Board of Agriculture, Division of Water Resources
 Application Number: 8

DEPTH OF COMPLETED WELL: 135 ft. Bore Hole Diameter: 12 in. to 69 ft., and 10 in. to 135 ft.

Well Water to be used as:
 5 Public water supply
 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: 40 ft. below land surface measured on _____ month _____ day _____ year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield: 31 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR)
 2 PVC 4 ABS
 5 Wrought iron 8 Concrete tile Casing Joints: Welded Clamped
 6 Asbestos-Cement 9 Other (specify below)
 7 Fiberglass Threaded

Blank casing dia: 8 1/4 in. to 69 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 36 in., weight Sch. 40 lbs./ft. Wall thickness or gauge No _____

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR)
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
 7 PVC 10 Asbestos-cement
 11 Other (specify)

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: _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Screen-Perforated Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

Gravel Pack Intervals: No From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Power Cement Monarch
 Grouted Intervals: From 4 ft. to 69 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination? None
 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 _____ How many feet _____? Water Well Disinfected? Yes XXX No

Has a chemical/bacteriological sample submitted to Department? Yes _____ No _____ If yes, date sample submitted _____ month _____ day _____ year

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

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on November 12 month 12 day 1980 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 371
 This Water Well Record was completed on December 21 month 21 day 1980 year under the business name of Royce Swank Drilling by (signature) Royce Swank

| LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHOLOGIC LOG |
|--|------|-----|------------------|------|----|----------------|
| | 0 | 6 | Soil | | | |
| | 6 | 31 | Clay | | | |
| | 31 | 69 | Yellow Sand Rock | | | |
| | 69 | 87 | Gray Sand Rock | | | |
| | 87 | 127 | White Sand | | | |
| | 127 | 130 | Lime | | | |
| | 130 | 135 | Shale | | | |

ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 69 ft. 2. 87 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.