

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Marion</u>		<u>SE</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	<u>33</u>	<u>T</u> <u>18</u> <u>S</u>	<u>R</u> <u>1</u> <u>E</u>
Distance and direction from nearest town or city street address of well if located within city?					
<u>5 1/2 Miles North of Lehigh, KS</u>					
2 WATER WELL OWNER: <u>Marion County RWD #1</u>					
RR#, St. Address, Box # : <u>c/o Schwab-Eaton</u>				Board of Agriculture, Division of Water Resources	
City, State, ZIP Code : <u>1125 Garden Way, Manhattan, KS 66502</u>				Application Number:	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>80</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>38' 2"</u> ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>38' 2"</u> ft. below land surface measured on mo/day/yr <u>1.2.1.7-91</u>			
		Pump test data: Well water was ft. after hours pumping gpm			
		Est. Yield <u>62</u> gpm: Well water was <u>47' 8 1/2"</u> ft. after <u>7 1/2</u> hours pumping <u>62</u> gpm			
		Bore Hole Diameter <u>18</u> in. to <u>80 1/2</u> ft., and in. to ft.			
WELL WATER TO BE USED AS:		5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well			
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 <u>X</u> No					
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped
2 PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded
			7 Fiberglass		Threaded
Blank casing diameter <u>6</u> in. to <u>65</u> ft., Dia. in. to ft., Dia. in. to ft.					
Casing height above land surface <u>20</u> in., weight <u>3.36</u> lbs./ft. Wall thickness or gauge No. <u>255</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 <u>Stainless steel</u>	5 Fiberglass	7 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>Mill slot</u>	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter		4 <u>Key punched</u>	6 Wire wrapped	9 Drilled holes	
			7 Torch cut	10 Other (specify)	
SCREEN-PERFORATED INTERVALS: From <u>65</u> ft. to <u>80</u> ft., From ft. to ft.					
GRAVEL PACK INTERVALS: From <u>42</u> ft. to <u>80</u> ft., From ft. to ft.					
<u>Annular Backfill</u> From <u>24</u> ft. to <u>42</u> ft., From ft. to ft.					
6 GROUT MATERIAL: 1 Neat cement 2 <u>Cement grout</u> 3 Bentonite 4 Other					
Grout Intervals: From <u>5</u> ft. to <u>25</u> ft., From ft. to ft., From ft. to ft.					
What is the nearest source of possible contamination: <u>None within 1/4 Mile</u>					
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)
				13 Insecticide storage	
Direction from well? How many feet?					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top Soil			
3	5	Yellow Clay			
5	8	Gray Shale & Sand Rock			
8	31	Brown Sandstone			
31	42	Gray Shale with small sandstone Layers			
42	65	Brown Sandstone			
65	69	Gray Shale			
69	80	Light Brown Sandstone			
80	80 1/2	Iron Pirite			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>12-24-91</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>138</u> This Water Well Record was completed on (mo/day/yr) <u>12-24-91</u> under the business name of <u>Peterson Irrigation, Inc.</u> by (signature) <u>Mike Peterson</u>					
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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					