

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>Franklin</u>	<u>SE</u> 1/4 <u>SE</u> 1/4 <u>NW</u> 1/4	<u>28</u>	<u>T 18</u> <u>S</u>	<u>R 19</u> <u>E/W</u>

Distance and direction from nearest town or city? 3 MI W, 2 1/4 MI. S of Princeton 3/8 E Street address of well if located within city?

2 WATER WELL OWNER: John F. Musick
 RR#, St. Address, Box #: R. R. 1 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Princeton, Kansas 66078 Application Number:

3 DEPTH OF COMPLETED WELL: 335 ft. Bore Hole Diameter: 8 1/4 in. to 150 ft., and 6 1/4 in. to 335 ft.
 Well Water to be used as:
 1 (Domestic) 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 7 Lawn and garden only 10 Observation well
 Well's static water level: 20 ft. below land surface measured on _____ month _____ day _____ year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield: 79 GPH 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: 6" in. to 150 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight _____ lbs./ft. Wall thickness or gauge No: 0.250

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 11 Other (specify) _____
 2 Brass 4 Galvanized steel 6 Concrete tile 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: _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 20 ft. to 35 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: 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 20 ft. to 0 ft., From _____ ft. to _____ 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)
 Direction from well: North How many feet: 300 ? Water Well Disinfected? Yes _____ No _____
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No No If yes, date sample was submitted _____ month _____ day _____ year Pump Installed? Yes _____ No No
 If Yes: Pump Manufacturer's name: NONE 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 AUG month 22 day 1980 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 107
 This Water Well Record was completed on SEPT month 23 day 1980 year under the business name of George H. Swank Water Well Drilling by (signature) George H. Swank

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	<u>0</u>	<u>10</u>	<u>Sandy Soil</u>	<u>210</u>	<u>214</u>	<u>Gray Shale</u>
	<u>13</u>	<u>23</u>	<u>Yellow Sand Rock</u>	<u>6</u>	<u>214</u>	<u>Gray Sand</u>
	<u>10</u>	<u>145</u>	<u>Sandy Gray Shale</u>	<u>115</u>	<u>220</u>	<u>Sandy Gray Shale</u>
	<u>9</u>	<u>155</u>	<u>Blue Lime</u>			
	<u>6</u>	<u>164</u>	<u>White Lime</u>			
	<u>10</u>	<u>170</u>	<u>Black Shale</u>			
	<u>5</u>	<u>180</u>	<u>White Lime</u>			
	<u>20</u>	<u>185</u>	<u>Gray Shale</u>			
	<u>5</u>	<u>205</u>	<u>White Lime</u>			
	<u>5</u>	<u>210</u>	<u>Blue Lime</u>			

ELEVATION: _____ ft. _____ ft. _____ ft. _____ 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