

1 LOCATION OF WATER WELL: Fraction SW 1/4 SW 1/4 SE 1/4 Section Number 30 Township Number T 19 S Range Number R 4 **EW**

Distance and direction from nearest town or city street address of well if located within city?
90' LT. Station 693+00 Project 56-57 K 0561-01

2 WATER WELL OWNER: George Baxter
 RR#, St. Address, Box # : _____ Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Marion, Kansas 66861 Application Number: _____

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

4 DEPTH OF COMPLETED WELL... 33.5 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL ... 10.5 ft. below land surface measured on mo/day/yr ... 6/27/86
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: _____ in. to _____ ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 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 Observation well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes _____ No _____

5 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 diameter 6 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 6 in., weight _____ lbs./ft. Wall thickness or gauge No. _____
 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:
 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-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete
 Grout Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: NONE Abandoned Farmstead 10 Livestock pens 14 Abandoned water well
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
33.5	16'	Sand and Gravel (3.4 Cu. Ft.)			
16'	6'	Concrete (2.0 Cu. Ft.)			

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) 6/27/86 and this record is true to the best of my knowledge and belief. Kansas
 Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) _____
 under the business name of Ideker Construction Co., Inc. by (signature) Marvin Beattie
 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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.