

1 LOCATION OF WATER WELL  
 County: Marion Fraction Ne 1/4 Se 1/4 Sw 1/4 Section Number 20 Township Number T 19 S Range Number R 4 E  
 Distance and direction from nearest town or city? Marion 2 N 1/4 W Street address of well if located within city?

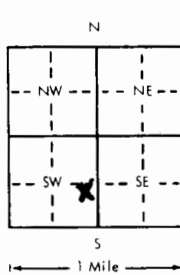
2 WATER WELL OWNER: Robert Navant  
 RR#, St. Address, Box #: Box 82 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Marion KS 66861 Application Number:

3 DEPTH OF COMPLETED WELL: 82 ft. Bore Hole Diameter: 9 in. to 10 ft., and 7 in. to 82 ft.  
 Well Water to be used as:  
 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: 52 ft. below land surface measured on 7 month 14 day 79 year  
 Pump Test Data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Est. Yield 20 gpm: 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 7 Fiberglass J-L Well casing Styrene Welded \_\_\_\_\_  
 9 Other (specify below) Threaded \_\_\_\_\_  
 Blank casing dia: 5 in. to 72 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface: 14 in., weight 200 wall lbs./ft. Wall thickness or gauge No. 200 wall  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement Styrene  
 2 Brass 4 Galvanized steel 6 Concrete tile 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-Perforation Dia: 5 in. to 82 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Screen-Perforated Intervals: From 72 ft. to 82 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 Gravel Pack Intervals: From 10 ft. to 82 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 0 ft. to 10 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 What is the nearest source of possible contamination?  Sewage lagoon 10 Fuel storage 14 Abandoned water well  
 1 Septic tank 4 Cess pool 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well  
 2 Sewer lines 5 Seepage pit 9 Livestock pens 12 Insecticide storage 16 Other (specify below)  
 3 Lateral lines 6 Pit privy 13 Watertight sewer lines  
 Direction from well: West How many feet: 60 ? 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 \_\_\_\_\_ 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 \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 180  
 This Water Well Record was completed on \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year under the business name of Backhus Drilling by (signature) Paul Backhus

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Top Soil			
3	11	lime stone			
11	21	Yellow clay			
21	45	Blue shale			
45	74	lime stone			
74	75	Water			
75	82	Blue shale			

ELEVATION:  
 Depth(s) Groundwater Encountered 1. \_\_\_\_\_ 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  
 SEC  
 20  
 NE 1/4 SE 1/4 SW 1/4