

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number			
County: <u>Marshall</u>		<u>SE 1/4 SE 1/4 SE 1/4</u>		<u>23</u>		T <u>1</u> S		R <u>6</u> <u>EW</u>			
Distance and direction from nearest town or city street address of well if located within city? <u>3 1/2 North, Harkimer</u>											
2 WATER WELL OWNER: <u>O'Neil Farm Inc. (Harkimer Farm)</u>											
RR#, St. Address, Box #: <u>Box 129</u>											
City, State, ZIP Code: <u>Columbus, Nebraska 68601</u>											
Board of Agriculture, Division of Water Resources Application Number:											
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL _____ ft. ELEVATION: _____									
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.									
		WELL'S STATIC WATER LEVEL <u>70</u> ft. below land surface measured on mo/day/yr <u>7-24-89</u>									
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm									
		Est. Yield <u>20</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm									
		Bore Hole Diameter <u>8</u> in. to <u>120</u> ft., and _____ in. to _____ ft.									
WELL WATER TO BE USED AS:											
5 Public water supply    8 Air conditioning    11 Injection well 1 Domestic <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> ; If yes, mo/day/yr sample was submitted _____											
Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____											
5 TYPE OF BLANK CASING USED:											
1 Steel    3 RMP (SR)    5 Wrought iron    8 Concrete tile    CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____ 2 PVC <input checked="" type="checkbox"/> 4 ABS    6 Asbestos-Cement    9 Other (specify below)    Welded _____ 7 Fiberglass    Threaded _____											
Blank casing diameter <u>5</u> in. to <u>100</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.											
Casing height above land surface <u>24</u> in., weight <u>200</u> lbs./ft. Wall thickness or gauge No. _____											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
1 Steel    3 Stainless steel    5 Fiberglass    7 PVC <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> 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 <u>100</u> ft. to <u>120</u> ft., From _____ ft. to _____ ft.											
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>120</u> ft., From _____ ft. to _____ ft.											
6 GROUT MATERIAL:											
1 Neat cement    2 Cement grout    3 Bentonite <input checked="" type="checkbox"/> 4 Other _____ Grout Intervals: From <u>0</u> ft. to <u>20</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.											
What is the nearest source of possible contamination:											
1 Septic tank    4 Lateral lines    7 Pit privy    10 Livestock pens    14 Abandoned water well 2 Sewer lines    5 Cess pool <input checked="" type="checkbox"/> 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? <u>North</u> How many feet? <u>500</u>											
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS	
0		18		Brown clay							
18		55		yellow shale							
55		59		Light Blue shale							
59		95		Red shale							
95		100		Limestone							
100		109		Limestone layers & gray shale							
109		120		Gray							
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>7-24-89</u> and this record is true to the best of my knowledge and belief. Kansas											
Water Well Contractor's License No. <u>234</u> This Water Well Record was completed on (mo/day/yr) _____											
under the business name of <u>Shades Blue Valley Drilling</u> by (signature) <u>Betty Fox Strader</u>											