

1 LOCATION OF WATER WELL County: Marshall	Fraction $\frac{1}{4}$ SW $\frac{1}{4}$ SW $\frac{1}{4}$	Section Number 9	Township Number T 1 S	Range Number R 7 EW
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Distance and direction from nearest town or city?
Oketo 2 West - 1/4 North ESR

Street address of well if located within city?

2 WATER WELL OWNER: **Edward Luppen**
RR#, St. Address, Box #: **Rt. #2, Marysville, Kansas 66508**
City, State, ZIP Code

Board of Agriculture, Division of Water Resources
Application Number:

3 DEPTH OF COMPLETED WELL: **83** ft. Bore Hole Diameter: **9** in. to **83** ft. and **81/14/82/03** in. to **100** ft.

Well Water to be used as:
 1 Domestic **(1)** 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

Well's static water level: **35** ft. below land surface measured on **12** month **23** day **81** 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 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass _____ Threaded _____

Blank casing dia **5** in. Dia **63** in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface: **16** in., weight **200#** 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 9 ABS 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 **83** ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From **63** ft. to **83** ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 Gravel Pack Intervals: From **26** ft. to **83** 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 **6** ft. to **26** 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)
 13 Watertight sewer lines

Direction from well: **East** How many feet: **50'** 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 **12** month **23** day **81** year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **234D**
 This Water Well Record was completed on **01** month **11** day **82** year under the business name of **Blue Valley Drilling Co.** by (signature) *Edward Luppen*

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	3	Top soil	53	59	Blue caly & shale
	3	5	Tan clay	59	64	Brown clay
	5	13	Brown clay	64	65	Tan clay
	13	21	Sandy tan clay	65	78	Sandstone layers
	21	28	Brown clay	78	83	Limestone
	28	32	Yellow clay			
	32	41	Blue clay & shale			
	41	49	Limestone			
	49	51	Black shale			
	51	53	Limestone			

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.