

1 LOCATION OF WATER WELL
 County: Marion Fraction NE 1/4 NE 1/4 NE 1/4 Section Number 5 Township Number T 20 S Range Number R 4 E/W

Distance and direction from nearest town or city? In City Street address of well if located within city? 220 Tanglewood Lane

2 WATER WELL OWNER: David Blackim
 RR#, St. Address, Box #: 320 Tanglewood Lane Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Marion, KS. Application Number:

3 DEPTH OF COMPLETED WELL: 7 ft. Bore Hole Diameter: 9 in. to 15 ft., and 15 in. to _____ ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 5 Public water supply 6 Oil field water supply 8 Air conditioning 9 Dewatering 11 Injection well
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well 12 Other (Specify below)
 Well's static water level _____ ft. below land surface measured on _____ month 23 day 79 year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 25 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 6 Asbestos-Cement 8 Concrete tile 9 Other (specify below) Casing Joints: Glued _____ Clamped _____
 2 PVC 4 ABS 7 Fiberglass _____ Welded _____
 Blank casing dia 5 in. to 52 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 12 in., weight _____ lbs./ft. Wall thickness or gauge No _____
 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 64 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) _____
 Screen-Perforation Dia 5 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 52 ft. to 64 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 25 ft. to 70 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 3 ft. to 13 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)
 10 Watertight sewer lines
 Direction from well SE How many feet 25 ? 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 23 day _____ year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 18079
 This Water Well Record was completed on _____ month 23 day _____ year under the business name of Bachhu's Drilling by (signature) Paul Bachhu

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	3	Top Soil			
	3	17	lime stone			
	17	32	Yellow Clay			
	32	33	Gime Water			
	33	62	Red Shale			
	62	63	Water			
	63	70	lime Stone			

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 66608. Send one to WATER WELL OWNER.