

1 LOCATION OF WATER WELL
 County: MIAMI Fraction: NE 1/4 NE 1/4 NW 1/4 Section Number: 17 Township Number: T 21 S Range Number: R 1 EW

Distance and direction from nearest town or city? 1.50 mi EAST of GORSEL Street address of well if located within city?

2 WATER WELL OWNER: Robt Peterson
 RR#, St. Address, Box #: RR #2 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Newton, KS 67114 Application Number:

3 DEPTH OF COMPLETED WELL: 48 ft. Bore Hole Diameter: 11 in. to ... ft., and ... in. to ... ft.
 Well Water to be used as:
 1 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: 27 ft. below land surface measured on 7 month 20 day 81 year
 Pump Test Data: 4 gpm: Well water was ... ft. after ... hours pumping ... gpm
 Est. Yield: 4 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 ... in. to ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft.
 Casing height above land surface ... 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
 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 7 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Drilled holes
 7 Torch cut 10 Other (specify) ...
 Screen-Perforation Dia ... in. to ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft.
 Screen-Perforated Intervals: 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.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other ...
 Grouted Intervals: From ... ft. to ... 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: SO How many feet: 95' 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 X 7 (7) month 20 (20) day 81 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 175
 This Water Well Record was completed on 9 month 11 day 81 year under the business name of PAUL'S INC by (signature) Paul Bunker

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		TO		LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	5	5	10	LOAM	0	5
	5	10	10	15	dark clay	5	10	
	10	15	15	21	fine SAND	10	15	
	15	21	21	27	tan SANDY CLAY to grey	15	21	
	21	27	27	34	tan clay - gummy	21	27	
	27	34	34	41	fine SAND - some clay	27	34	
	34	41	41	45	green shale - 1 layer of red New shale	34	41	
	41	45	45	48	green-grey shale	41	45	
	45	48	48	48	dark shale (Wellington)	45	48	

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