

1 LOCATION OF WATER WELL
 County: MARION Fraction NW 1/4 NW 1/4 NW 1/4 Section Number 9 Township Number T 21 S Range Number R 3 E

Distance and direction from nearest town or city? 5 mi N Peabody
 Street address of well if located within city?

2 WATER WELL OWNER: BRAD PENDLEY
 RR#, St. Address, Box #: RR 2
 City, State, ZIP Code: Peabody KANSAS
 Board of Agriculture, Division of Water Resources
 Application Number:

3 DEPTH OF COMPLETED WELL: 53 ft. Bore Hole Diameter: 10 in. to 28 ft., and 7 in. to 53 ft.

Well Water to be used as:
 1 Domestic 3 Feedlot 6 Oil field water supply 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: 20 ft. below land surface measured on 4 month 1 day 81 year

Pump Test Data: Well water was 25 ft. after 1 hours pumping 15 gpm
 Est. Yield 15-20 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 5 RMP (SR) 8 Concrete tile Casing Joints: Glued Clamped
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded
 3 Fiberglass 7 Fiberglass Threaded

Blank casing dia: 5 in. to 20 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.

Casing height above land surface: 18 in. weight 2-20 lbs./ft. Wall thickness or gauge No. 320

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 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 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 53 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.

Screen-Perforated Intervals:
 From 20 ft. to 53 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 From 14 ft. to 53 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

Gravel Pack Intervals:
 From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 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 3 ft. to 14 ft. 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 lagoo 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: SW How many feet: 150 feet ? 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: Pumpco Model No. 4102558 HP 1/2 Volts 230
 Depth of Pump Intake: 40 ft. Pumps Capacity rated at 70 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 4 month 1 day 81 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 211
 This Water Well Record was completed on 5 month 10 day 81 year under the business name of DWR Well Service by (signature) W. H. Williams

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		TO		LITHOLOGIC LOG	FROM		TO		LITHOLOGIC LOG
	0	2	2	15	TOP SOIL					
	2	15	15	28	Red clay					
	15	28	28	53	SANDY ROCK BROWN					
	28	53	53		SHALE GREY					
ELEVATION: <u>UPLAND</u>										

Depth(s) Groundwater Encountered 1. 28 ft. 2. 45 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
T
R
S
DW
SEC.
1/4
1/4
1/4
1/4