

1 LOCATION OF WATER WELL
 County: Chase Fraction: NW 1/4 NW 1/4 NW 1/4 Section Number: 31 Township Number: T 21 S Range Number: R 7 E
 Distance and direction from nearest town or city? 8.5 x 2 E Clements Ks. Street address of well if located within city?

2 WATER WELL OWNER: Homestead Friends Church. Personage
 RR#, St. Address, Box #: RR-1 Box 109 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Croder Point Ks 66843 Application Number: NA

3 DEPTH OF COMPLETED WELL: 59' ft. Bore Hole Diameter: 12 in. to 59' ft., and _____ in. to _____ ft.
 Well Water to be used as:
 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: 24' ft. below land surface measured on 9 month 29 day 81 year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 1-2 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Casing Joints: Glued Clamped
 2 PVC 4 ABS 7 Fiberglass 10 Asbestos-cement Welded _____
 Blank casing dia: 8" in. to 19 ft., Dia: 10 in. to 59 ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 24 in., weight _____ lbs./ft. Wall thickness or gauge No: 3/8
 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) _____
 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 5/16
 7 Torch cut 10 Other (specify) _____
 Screen-Perforation Dia: 10 in. to 59' ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 21 ft. to 57 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 3 ft. to 19 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)
 Direction from well: NE How many feet: 100'+ ? 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 10 month 1 day 1981 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 203
 This Water Well Record was completed on 10 month 4 day 81 year under the business name of M. Nee Drilling & Metals by (signature) J. Nee

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	1	TS Bk			
1	5	Cl Brn			
5	12	Weathered Sh Brn			
12	17	Ls Brn weathered			
17	23	Ls Brn Ft Riley?			
23	36	Sh Gray - Gneiss			
36	40	Ls Med Dense Gray			
40	45	Cal Sh Gray			
45	54	Ls Med Dense			
54	59	Sh Butt			

ELEVATION: _____

Depth(s) Groundwater Encountered 1. 40 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

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SEC 31

NW 1/4 NE 1/4 SW 1/4 SE 1/4