

1 LOCATION OF WATER WELL  
 County: marion Fraction NW 1/4 NW 1/4 NE 1/4 Section Number 4 Township Number T 22 S Range Number R 3 E  
 Distance and direction from nearest town or city? In City Street address of well if located within city? 605 Sycamore

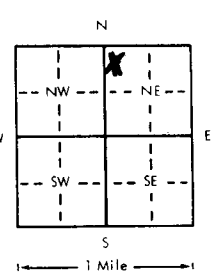
2 WATER WELL OWNER:  
 RR#, St. Address, Box # G. Solwen Peabody, KS 66866 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code G. Solwen Peabody, KS 66866 Application Number:

3 DEPTH OF COMPLETED WELL. 55 ft. Bore Hole Diameter total 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 2.7 ft. below land surface measured on Completion month . . . . . day . . . . . year  
 Pump Test Data 7 : Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm  
 Est. Yield 7 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 6 in. to . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.  
 Casing height above land surface 30" in., weight . . . . . lbs./ft. Wall thickness or gauge No 14  
 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 6 in. to 6 ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.  
 Screen-Perforated Intervals: From 46 ft. to 55 ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  
 Gravel Pack Intervals: X From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  
 From None 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 1 ft. to 12 ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 4 Cess pool None 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 . . . . . How many 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 . . . . . Model No. . . . . HP . . . . . Volts . . . . .  
 Depth of Pump Intake . . . . . ft. Pumps Capacity rated at . . . . . gal./min.  
 Type of pump: 9 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 June 14 month . . . . . day . . . . . year 1984  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 396  
 This Water Well Record was completed on Same month . . . . . day transferred year under the business  
 name of Cursler Bros Const by (signature) H. Cursler 17-27-84

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
1	4	soil			
4	9	red clay			
9	27	of sandy tan clay			
27	48	blue shale			
49		water			
49	55.9	blue shale			

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  
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 R  
 SEC  
 1/4 NW  
 1/4 NE  
 1/4

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