SE SW SW NW KSA 82a-1212 Township Number Section Number 26 well if located within city? Distance and direction from nearest town or Board of Agriculture, Division of Water Resources RR#, St. Address, Box # Application Number: City, State, ZIP Code EVATIÓN: 13 00 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: Pump test data: Well water was ft. after hours pumping gpm Est. Yield gpm: Well water was ft. after hours pumping gpm 8 Air conditioning 11 Injection well 9 Dewatering 12 Other (Specify below) WELL WATER TO BE USED AS: 5 Public water supply 9 Dewatering 6 Oil field water supply 1 Domestic 3 Feedlot Domestic (lawn & garden) 10 Monitoring well 2 Irrigation 4 Industrial SE Water Well Disinfected? Yes mitted TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped 6 Asbestos-Cement Welded Steel 3 RMP (SR) 9 Other (specify below) Threaded 7 Fiberglass Blank casing diameter **76** ft., Dia in. to ft., Dia in. to ft. Casing height above land surface TYPE OF SCREEN OR PERFORATION MATERIAL: 10 Asbestos-Cement 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 11 Other (Specify) 1 Steel 12 None used (open hole) 4 Galvanized Steel 6 Concrete tile 9 ABS 2 Brass SCREEN OR PERFORATION OPENINGS ARE: 5 Guazed wrapped 8 Saw cut 11 None (open hole) 6 Wire wrapped 9 Drilled holes 1 Continuous slot 7 Torch cut 10 Other (specify)ft. Key punched 2 Louvered shutter SCREEN-PERFORATED INTERVALS: From **GRAVEL PACK INTERVALS:** 2 Cement grout 3 Bentonite 16 ft. to 0 ft., From ft., From ft. to ft., From ft. to ft., From ft. 10 Livestock pens What is the nearest source of possible contamination: 14 Abandoned water well 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) Watertight sewer lines 6 Seepage p 9 Feedyard 13 Insecticide storage Direction from well? How many feet? FROM PLUGGING INTERVALS FROM ONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and wasand this record is true to the best of my knowledge and belief. Kansas completed on (mo/day/year) Water Well Contractor's Licence No by (signature) under the business name of 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

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Healt and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your