

1 LOCATION OF WATER WELL Fraction SW 1/4 NE 1/4 NE 1/4 Section Number 11 Township Number T 2 S Range Number R 2 E
 County: WASHINGTON

Distance and direction from nearest town or city? 3 1/2 N 1/2 E Street address of well if located within city?
MORROWVILLE

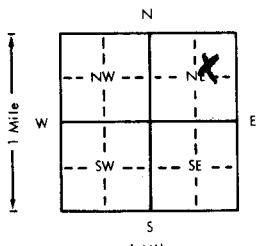
2 WATER WELL OWNER: JERRY KOLMAN
 RR#, St. Address, Box # :
 City, State, ZIP Code : MORROWVILLE, KANSAS 66958 Board of Agriculture, Division of Water Resources
 Application Number:

3 DEPTH OF COMPLETED WELL: 114 ft. Bore Hole Diameter: 8 in. to 114 ft. and _____ in. to _____ ft.
 Well Water to be used as:
 Domestic 3 Feedlot 6 Oil field water supply 8 Air conditioning 11 Injection well
 Irrigation 4 Industrial 7 Lawn and garden only 9 Dewatering 12 Other (Specify below)
 10 Observation well
 Well's static water level: 80 ft. below land surface measured on _____ 4 month _____ 16 day _____ 1981 year
 Pump Test Data : Well water was _____ NA ft. after _____ hours pumping _____ gpm
 Est. Yield 30 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 8 Concrete tile Casing Joints: Glued Clamped _____
 2 PVC 4 ABS 7 Fiberglass 9 Other (specify below) Welded _____
 Blank casing dia _____ 5 in. to _____ 94 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface _____ 12 in., weight _____ lbs./ft. Wall thickness or gauge No. 1258
 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 7 Torch cut 9 Drilled holes
 Screen-Perforation Dia _____ 5 in. to _____ 114 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From _____ 94 ft. to _____ 114 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From _____ 4 ft. to _____ 114 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 _____ 4 ft. to _____ 14 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 _____ EAST How many feet _____ 250 ? 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 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ 4 month _____ 16 day _____ 1981 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 359
 This Water Well Record was completed on _____ 4 month _____ 21 day _____ 1981 year under the business name of DARYL COX & SONS INC by (signature) Daryl Cox

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


FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	TOPSOIL			
2	38	BROWN CLAY			
38	54	RED CLAY			
54	56	HARD ROCK			
56	80	BLUE CLAY w/ ROCK LAYERS			
80	112	SANDROCK			
112	114	BLUE CLAY			
114		STOP			

 ELEVATION: 1000

Depth(s) Groundwater Encountered 1. 80 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.