

1 LOCATION OF WATER WELL: County: Marshall Fraction: SE 1/4 SE 1/4 NE 1/4 Section Number: 11 Township Number: T 2 S Range Number: R 6 E

Distance and direction from nearest town or city? in Hershimer Street address of well if located within city? No Street names

2 WATER WELL OWNER: Mark Crome
 RR#, St. Address, Box #: _____
 City, State, ZIP Code: Hershimer Kans 66433 Board of Agriculture, Division of Water Resources
 Application Number: _____

3 DEPTH OF COMPLETED WELL: 78 ft. Bore Hole Diameter: 10 in. to 16 ft. and 6 1/2 in. to 78 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: 65 ft. below land surface measured on oct month 29 day 1980 year
 Pump Test Data: Well water was _____ 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) 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: 5 in. to 58 ft. Dia: 5 in. to 78 ft. Dia: _____ in. to _____ ft.
 Casing height above land surface: 12 in. weight _____ lbs./ft. Wall thickness or gauge No. 267 Wall
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 11 Other (specify) _____
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
 Screen or Perforation Openings Are: 040 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____
 Screen-Perforation Dia: 5 in. to 78 ft. Dia: 58 in. to _____ ft. Dia: _____ in. to _____ ft.
 Screen-Perforated Intervals: From 58 ft. to 78 ft. From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 78 ft. to 16 ft. From _____ ft. to _____ ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grouted Intervals: From 16 ft. to 6 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: northwest How many feet: 125 ? 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: NA 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 oct month 29 day 1980 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 237
 This Water Well Record was completed on oct month 30 day 1980 year under the business name of Strader Drilling Co. by (signature) Harold Strader

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		LITHOLOGIC LOG	TO		LITHOLOGIC LOG
	0	5		5	10	
	0	5	top soil, Black			
	5	20	clay, yellow			
	20	40	clay, red			
	40	48	Rock, limestone soft			
	48	52	shale, blue			
	52	65	shale, red			
	65	71	Rock, yellow lime water 30 gal M			
	71	78	Rock, Blue Hard			

ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 65 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.