

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>Cowley</u>	SE ¼ NE ¼ SE ¼	10	T 30 S	R 4 E EW

Distance and direction from nearest town or city? 2½ miles North of Rock, Ks.
 Street address of well if located within city?

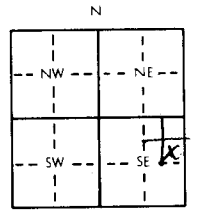
2 WATER WELL OWNER: Marty Shawver
 RR#, St. Address, Box # R.R. 1
 City, State, ZIP Code Rock, Kansas 67031
 Board of Agriculture, Division of Water Resources
 Application Number:

3 DEPTH OF COMPLETED WELL: 120 ft. Bore Hole Diameter: 10 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: 40 ft. below land surface measured on April month 5th day 1989 year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield NA 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 120 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface: 14 in., weight 160 lbs./ft. Wall thickness or gauge No. 3/4
 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:
 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 _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 100 ft. to 120 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 120 ft. to 20 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 0 ft. to 20 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 11 Fertilizer storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 15 Oil well/Gas well
 3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines 16 Other (specify below) _____
 Direction from well East How many feet 400 ? 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 Gould Model No. 47804 HP 3 Volts 230
 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 April month 5th day 1989 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 299
 This Water Well Record was completed on April month 18 day 1989 year under the business
 name of Eastman Drilling by (signature) Dale Eastman

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	
		<u>0</u>	<u>17</u>	<u>Top Soil</u>	<u>90</u>	<u>100</u>	<u>Gray Clay</u>
		<u>17</u>	<u>34</u>	<u>Red Clay</u>	<u>100</u>	<u>120</u>	<u>Brown Clay</u>
		<u>35</u>	<u>40</u>	<u>Limestone</u>			
		<u>40</u>	<u>45</u>	<u>Gray Clay</u>			
		<u>45</u>	<u>48</u>	<u>Limestone</u>			
		<u>48</u>	<u>54</u>	<u>Brown Mud</u>			
		<u>55</u>	<u>80</u>	<u>Brown Mud</u>			
		<u>80</u>	<u>82</u>	<u>Blue Schale</u>			
		<u>82</u>	<u>83</u>	<u>Limestone</u>			
	<u>83</u>	<u>85</u>	<u>Blue Clay</u>				
ELEVATION:	<u>85</u>	<u>90</u>	<u>Cream colored Limestone</u>				

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 T R EW SEC 1/4 1/4 1/4