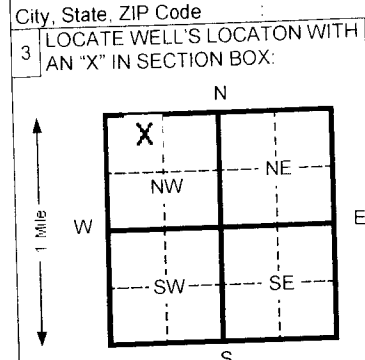


1 LOCATION OF WATER WELL: Fraction **NE 1/4 NW 1/4 NW 1/4** Section Number **19** Township Number **T 31 S** Range Number **R 20 E**
 County: **Labette**
 Distance and direction from nearest town or city street address of well if located within city?
SE corner of 16th and Main, Parsons Kansas

2 WATER WELL OWNER: **Pete's of Parsons Inc.**
1712 Broadway Ave
 RR#, St. Address, Box # : **Parsons, KS 67357**
 City, State, ZIP Code :
 Board of Agriculture, Division of Water Resources
 Application Number:



4 DEPTH OF COMPLETED WELL **15** ft. ELEVATION:
 Depth(s) Groundwater Encountered **11.5** ft. 2 ft. 3 ft. Ft.
 WELL'S STATIC WATER LEVEL **NA** ft. below land surface measured on mo/day/yr
 Pump test data: Well water was _____ Ft. after _____ hours pumping Gpm
 Est. Yield Gpm: Well water was _____ Ft. after _____ Hours pumping Gpm
 Bore Hole Diameter **8.625** In. to **15** ft. and n. to _____ Ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 **Monitoring well** **MW-4**
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X** If yes, mo/day/yr sample was
 Submitted Water Well Disinfected? Yes _____ No **X**

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: G/Led Clamped
 2 **PVC** 4 ABS 6 Asbestos-Cement 9 Other (specify below) **Welded**
 7 Fiberglass **Threaded** **X**
 Blank casing diameter **2** in. to **5** Ft., Dia _____ in. to _____ ft.
 Casing height above land surface **FLUSH** In., weight **SCH 40** Lbs./ft. Wall thickness or gauge No. _____
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 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 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From **5** ft. to **15** ft. From _____ ft. to _____ ft.
 SAND PACK INTERVALS: From **4** ft. to **15** ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 **Bentonite** 4 Other
 Grout Intervals From **0** ft. to **1** Ft. From **1** Ft. to **4** ft. From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/ Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
Contaminated Site
 Direction from well? How many feet?

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	.5		Asphalt parking			
.5	3		Shale, tan weathered			
3	3.5		Limestone			
3.5	7		Shale, weathered			
7	12		Limestone			
12	14		Limestone, hard crystalline			
14	15		Shale, tan			
15	TD		End of Borehole			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w
 Completed on (mo/day/yr) **10/17/07** And this record is true to the best of my knowledge and belief. Kansas
 Water Well Contractor's License No. **585** This Water Well Record was completed on (mo/day/yr) **11/17/07**
 under the business name of **Associated Environmental, Inc.** By (signature) **Bradley Johnson**
 INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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