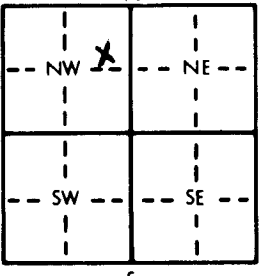


1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Montgomery</u>		<u>SW 1/4 NE 1/4 NW 1/4</u>	<u>13</u>	T <u>32</u> S	R <u>16</u> E/W
Distance and direction from nearest town or city street address of well if located within city? <u>(5 miles East of Independence, North) or (3 miles West of Cherryvale)</u>					
2 WATER WELL OWNER:					
RR#, St. Address, Box # : <u>Jerry Price (216 E Cottonwood)</u>					
City, State, ZIP Code : <u>Rt 4 Independence Kansas</u>					
Board of Agriculture, Division of Water Resources Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>150</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered <u>water storage</u> ft. 3. ft. ft.			
		WELL'S STATIC WATER LEVEL . . . 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 <u>6</u> in. to <u>10</u> ft., and <u>6</u> in. to <u>150</u> ft.			
		WELL WATER TO BE USED AS:			
		1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)			
		2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well			
		Was a chemical/bacteriological sample submitted to Department? Yes . . . No <input checked="" type="checkbox"/> . . . If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes <input checked="" type="checkbox"/> No			
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped . . .					
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded . . .					
7 Fiberglass . . . Threaded . . .					
Blank casing diameter <u>6</u> in. to <u>18</u> ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.					
Casing height above land surface <u>12</u> in., weight . . . lbs./ft. Wall thickness or gauge No. <u>SDR 21</u>					
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) . . .					
12 <u>None used</u> (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 <u>None</u> (open hole)					
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes					
7 Torch cut 10 Other (specify) . . .					
SCREEN-PERFORATED INTERVALS: From . . . ft. to . . . ft., From . . . ft. to . . . ft.					
From . . . ft. to . . . ft., From . . . ft. to . . . ft.					
GRAVEL PACK INTERVALS: From . . . ft. to . . . ft., From . . . ft. to . . . ft.					
From . . . ft. to . . . ft., From . . . ft. to . . . ft.					
6 GROUT MATERIAL: 1 Neat cement 2 <u>Cement grout</u> 3 Bentonite 4 Other . . .					
Grout Intervals: From <u>2</u> ft. to <u>12</u> ft., From . . . ft. to . . . 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)					
13 Insecticide storage <u>NONE KNOWN</u>					
Direction from well? How many feet?					
FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG					
0	2	Soil			
2	10	Clay			
10	15	Lime			
15	38	Shale			
38	40	Sandy Shale			
40	52	Shale			
52	59	Lime			
59	120	Shale			
120	130	Lime			
130	132	Shale			
132	150	Lime			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>April 25, 1985</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>393</u> This Water Well Record was completed on (mo/day/yr) <u>May 20, 1985</u> under the business name of <u>Country Water</u> by (signature) <u>Ray Weber</u>					
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, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					

04-8403738633