

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <b>WASHINGTON</b>	<b>SE 1/4 SE 1/4 SE 1/4</b>	<b>5</b>	<b>T 3 S</b>	<b>R 3 EW</b>

Distance and direction from nearest town or city? **3 WEST WASHINGTON** Street address of well if located within city?

2 WATER WELL OWNER: **LASTER BEKEMEYER**  
 RR#, St. Address, Box #: **WASHINGTON, KANSAS 66968**  
 City, State, ZIP Code: **WASHINGTON, KANSAS 66968**  
 Board of Agriculture, Division of Water Resources  
 Application Number:

3 DEPTH OF COMPLETED WELL: **100** ft. Bore Hole Diameter: **8** in. to **100** ft., and ... in. to ... ft.  
 Well Water to be used as:  
 Domestic  3 Feedlot  5 Public water supply  6 Oil field water supply  7 Lawn and garden only  8 Air conditioning  9 Dewatering  10 Observation well  11 Injection well  12 Other (Specify below)  
 Well's static water level: **60** ft. below land surface measured on **7** month **14** day **80** year  
 Pump Test Data: Est. Yield **30** gpm: Well water was **NA** ft. after ... hours pumping ... gpm  
 Well water was **NA** ft. after ... hours pumping ... gpm

4 TYPE OF BLANK CASING USED:  
 1 Steel  2 PVC  3 RMP (SR)  4 ABS  5 Wrought iron  6 Asbestos-Cement  7 Fiberglass  8 Concrete tile  9 Other (specify below)  
 Blank casing dia: **5** in. to **80** ft., Dia ... in. to ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft.  
 Casing height above land surface: **12** in., weight **3** lbs./ft. Wall thickness or gauge No. **258**

TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel  2 Brass  3 Stainless steel  4 Galvanized steel  5 Fiberglass  6 Concrete tile  7 PVC  8 RMP (SR)  9 ABS  10 Asbestos-cement  11 Other (specify)  12 None used (open hole)  
 Screen or Perforation Openings Are:  
 1 Continuous slot  2 Louvered shutter  3 Mill slot  4 Key punched  5 Gauzed wrapped  6 Wire wrapped  7 Torch cut  8 Saw cut  9 Drilled holes  10 Other (specify)  11 None (open hole)  
 Screen-Perforation Dia: **5** in. to **100** ft., Dia ... in. to ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft.  
 Screen-Perforated Intervals: From **80** ft. to **100** ft., From ... ft. to ... ft., From ... ft. to ... ft., From ... ft. to ... ft.  
 Gravel Pack Intervals: From **13** ft. to **100** ft., From ... ft. to ... 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 **3** ft. to **13** ft., From ... ft. to ... ft., From ... ft. to ... ft., From ... ft. to ... ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank  2 Sewer lines  3 Lateral lines  4 Cess pool  5 Seepage pit  6 Pit privy  7 Sewage lagoon  8 Feed yard  9 Livestock pens  10 Fuel storage  11 Fertilizer storage  12 Insecticide storage  13 Watertight sewer lines  14 Abandoned water well  15 Oil well/Gas well  16 Other (specify below)  
 Direction from well: **NW** How many feet: **75** ? 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 **7** month **14** day **80** 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 **7** month **14** day **80** 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	3	3	31	<b>TOPSOIL</b> <b>BROWN CLAY</b> <b>SAND/ROCK</b> <b>STOP</b>		
3		31	31	100				
31		100						
100								

ELEVATION: **1385 ft**

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  
3  
EW  
SEC.  
5  
SE 1/4  
SE 1/4  
SE 1/4  
SE 1/4