

1 LOCATION OF WATER WELL Fraction NW 1/4 NE 1/4 NW 1/4 Section Number 213 Township Number T 4 S Range Number R 6 E
 County: Marshall

Distance and direction from nearest town or city? Waterville Street address of well if located within city?
1 mile West 1 mile north 1/4 mile east 30, sideroad E

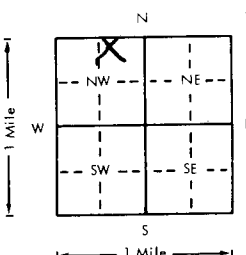
2 WATER WELL OWNER Ralph Roper Board of Agriculture, Division of Water Resources
 RR#, St. Address, Box # : Barnes Kans 66933 Application Number:

3 DEPTH OF COMPLETED WELL 100 ft. Bore Hole Diameter 10 in. to 15 ft., and 7 in. to 100 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 70 ft. below land surface measured on June month 23 day 1980 year
 Pump Test Data : Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 2 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 7" 00 in. to 6 1/2 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 12" in., weight 24 lbs./ft. Wall thickness or gauge No. 272
 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 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 7 Torch cut 9 Drilled holes 10 Other (specify) _____
 Screen-Perforation Dia 10 40 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 6 0 ft. to 80 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: 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 5 ft. to 15 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: 200ft east
 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) _____
 Direction of well EAST How many feet 150 ? 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 June month 23 day 1980 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____
 This Water Well Record was completed on June 23 month June day 1980 year under the business name of Strader Drilling Co by (signature) Harold Strader

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		TO		LITHOLOGIC LOG	FROM		TO		LITHOLOGIC LOG
		<u>0</u>	<u>5</u>	<u>5</u>	<u>62</u>	<u>top soil, black</u>				
	<u>5</u>	<u>62</u>	<u>62</u>	<u>100</u>	<u>sand & gravel</u>					
	<u>62</u>	<u>100</u>	<u>100</u>	<u>100</u>	<u>shale, blue</u>					

ELEVATION: _____ ft. 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
4
R
6
SEC.
21
NW 1/4 NE 1/4 SW 1/4 SE 1/4