

1	LOCATION OF WATER WELL: County: <b>Jackson</b>	Fraction <b>NW 1/4 SW 1/4 NW 1/4</b>	Section Number <b>2</b>	Township Number <b>T 6 S</b>	Range Number <b>R 14 E/W</b>
---	---	---	----------------------------	---------------------------------	---------------------------------

Distance and direction from nearest town or city street address of well if located within city?

1/2 mile north of Circleville

2 WATER WELL OWNER: **Don Askren**  
 RR#, St. Address, Box # : **26685 J4 Rd**  
 City, State, ZIP Code : **Circleville, Ks. 66416**  
 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>160</u> ft. ELEVATION:
--	---

Depth(s) Groundwater Encountered 1 ..... ft. 2 ..... ft. 3 ..... ft.  
 WELL'S STATIC WATER LEVEL 43 ft. below land surface measured on mo/day/yr ..... 11-1-07  
 Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield 10 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm  
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well  
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  
 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well .....

Was a chemical/bacteriological sample submitted to Department? Yes ..... No X .....; If yes, mo/day/yr sample was submitted  
 Water Well Disinfected? Yes X No

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped .....
<u>2 PVC</u>	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded .....
		7 Fiberglass		Threaded .....

Blank casing diameter 5 in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface 24 in., weight 2.82 lbs./ft. Wall thickness or guage No. .258

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-Cement
<u>2 Brass</u>	4 Galvanized Steel	6 Concrete tile	9 ABS	11 Other (Specify) .....
				12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Guazed wrapped	8 <u>Saw cut</u>	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify) .....	ft.

SCREEN-PERFORATED INTERVALS: From 77 ft. to 87 ft., From 140 ft. to 160 ft.  
 GRAVEL PACK INTERVALS: From 20 ft. to 160 ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....

Grout 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 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>pond</u>

Direction from well? south How many feet? 200

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	top soil	92	101	grey shale
2	3	brown clay	101	104	grey limestone
3	19	clay brown yellow sandy	104	121	grey shale
19	26	clay grey	121	123	grey limestone
26	27	coulders red	123	124	black shale
27	30	clay grey/sandy	124	143	grey shale
30	31	fine sand grey	143	157	sandstone grey shaley
31	36	clay grey sandy	157	160	grey shale
36	70	grey clay			
70	72	grey limestone loose			
72	77	shale grey			
77	81	limestone yellow soft			
81	90	shale grey			
90	92	shale black			

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) 11-1-07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 182 This Water Well Record was completed on (mo/day/yr) 11-14-07 under the business name of Strader Drilling Co., Inc. by (signature) *[Signature]*

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, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.