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|--|----------------------------------|---------------------|--------------------------|----------------------------------|
| 1 LOCATION OF WATER WELL: County: JACKSON | Fraction NE 1/4 SW 1/4 SW 1/4 | Section Number 9 | Township Number T 6 S | Range Number R 15 (EW) |
|--|----------------------------------|---------------------|--------------------------|----------------------------------|

Distance and direction from nearest town or city street address of well if located within city?
 4 3/4 miles north, 1/2 west of Holton

2 WATER WELL OWNER: Alan Schlodder
 RR#, St. Address, Box # : 26662 P Rd. Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Holton, KS 66436 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N

| | |
|----|----|
| NW | NE |
| SW | SE |

S

X

4 DEPTH OF COMPLETED WELL: 90' ft. ELEVATION:

Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL: 50' ft. below land surface measured on mo/day/yr 11/11/97

Pump test data: Well water was ft. after hours pumping gpm

Est. Yield . . . 40 . . . gpm: Well water was ft. after hours pumping gpm

Bore Hole Diameter: 12" . . . in. to ft., and in. to ft.

WELL WATER TO BE USED AS:

| | | | | |
|--------------------|--------------|--------------------------|--------------------|--------------------------|
| 1 Domestic | 3 Feedlot | 6 Oil field water supply | 8 Air conditioning | 11 Injection well |
| 2 Irrigation | 4 Industrial | 7 Lawn and garden only | 9 Dewatering | 12 Other (Specify below) |
| 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 X Clamped |
| 2 PVC | 4 ABS | 6 Asbestos-Cement | 9 Other (specify below) | Welded |
| | | | | Threaded |

Blank casing diameter 5" . . . in. to . . . 0-65 . . . ft., Dia 5" . . . in. to . . . 80-90 . . . ft., Dia in. to ft.

Casing height above land surface 24" . . . in., weight 2.82 lbs./ft. Wall thickness or gauge No. 258

TYPE OF SCREEN OR PERFORATION MATERIAL:

| | | | | |
|--------------------------|--------------------|-----------------|------------|--------------------|
| 1 Steel | 3 Stainless steel | 5 Fiberglass | 7 PVC | 10 Asbestos-cement |
| 2 Brass | 4 Galvanized steel | 6 Concrete tile | 8 RMP (SR) | 11 Other (specify) |
| 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 65 ft. to 80 ft., From ft. to ft.

GRAVEL PACK INTERVALS: From 24 ft. to 90 ft., From ft. to ft.

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

Grout Intervals: From 4 ft. to 24 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 | |

Direction from well? Northwest How many feet? 300'

| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|----|-----------------|------|----|--------------------|
| 0 | 1 | Top Soil | | | |
| 1 | 31 | Clay-Brown | | | |
| 31 | 32 | Clay-Blue | | | |
| 32 | 34 | Clay-Brown | | | |
| 34 | 79 | Fine Sand-Brown | | | |
| 79 | 81 | Clay-Brown | | | |
| 81 | 83 | Shale-Grey | | | |
| 83 | 90 | Shale-Red | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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) 11/11/97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 182 This Water Well Record was completed on (mo/day/yr) 11-20-97 under the business name of STRADER DRILLING CO., INC. by (signature) Dale Skren

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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY
T
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EW
SEC.