

1 LOCATION OF WATER WELL
 County: **Clay**
 Distance and direction from nearest town or city? **2 1/2 E - 1 1/4 S - 1/2 E**
 Street address of well if located within city? **1/4 S - 1/2 E of Clay Center**

2 WATER WELL OWNER: **Key Egg Farm**
 RR#, St. Address, Box #: **Clay Center, Kansas 67432**
 City, State, ZIP Code: **Clay Center, Kansas 67432**
 Board of Agriculture, Division of Water Resources
 Application Number:

3 DEPTH OF COMPLETED WELL: **160** ft. Bore Hole Diameter: **8** in. to **160** ft., and **160** in. to **160** 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: **80** ft. below land surface measured on **September** month **9** day **1980** year
 Pump Test Data: Well water was **150** ft. after **1/2** hours pumping. **25** gpm
 Est. Yield **25** gpm: Well water was **150** ft. after **1/2** hours pumping. **25** gpm

4 TYPE OF CASING USED:
 2 PVC 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued Clamped
 1 Steel 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded
 7 Fiberglass Threaded
 Blank casing dia **5** in. to **140** ft., Dia **3** in. to **140** ft., Dia **3** in. to **140** ft., Dia **3** in. to **140** ft.
 Casing height above land surface: **12** in., weight **3** lbs./ft. Wall thickness or gauge No. **258**

TYPE OF SCREEN OR PERFORATION MATERIAL:
 7 PVC 10 Asbestos-cement
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
 Screen or Perforation Openings Are:
 8 Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 6 Wire wrapped 10 Other (specify)
 7 Torch cut
 Screen-Perforation Dia: **5** in. to **5** ft., Dia **5** in. to **5** ft., Dia **5** in. to **5** ft., Dia **5** in. to **5** ft.
 Screen-Perforated Intervals: From **140** ft. to **160** ft., From **140** ft. to **160** ft., From **140** ft. to **160** ft., From **140** ft. to **160** ft.
 Gravel Pack Intervals: From **10** ft. to **160** ft., From **10** ft. to **160** ft., From **10** ft. to **160** ft., From **10** ft. to **160** ft.

5 GROUT MATERIAL: 2 Cement grout 3 Bentonite 4 Other
 Grouted Intervals: From **0** ft. to **10** ft., From **0** ft. to **10** ft., From **0** ft. to **10** ft., From **0** ft. to **10** ft.
 What is the nearest source of possible contamination:
 Sewage lagoon 10 Fuel storage 14 Abandoned water well
 1 Septic tank 4 Cess pool 11 Fertilizer storage 15 Oil well/Gas well
 2 Sewer lines 5 Seepage pit 12 Insecticide storage 16 Other (specify below)
 3 Lateral lines 6 Pit privy 13 Watertight sewer lines
 Direction from well: **North** How many feet: **700** ? Water Well Disinfected? Yes No
 Was a chemical/bacteriological sample submitted to Department? Yes No If yes, date sample
 was submitted **10** month **17** day **80** year Pump Installed? Yes No
 If Yes: Pump Manufacturer's name **Pumpco** Model No. **152S1011** HP **1** Volts **230**
 Depth of Pump Intake **152** ft. Pumps Capacity rated at **15** 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 **10** month **17** day **80** year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **361**
 This Water Well Record was completed on **11** month **07** day **80** year under the business name of **Cox - Beswick Irrigation Service, Inc.** by (signature) **James Cox**

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	70	Topsoil & clay			
	70	80	limerock			
	80	115	Clay			
	115	130	Limerock			
	130	148	Clay			
	148	160	Limerock			

ELEVATION:
 Depth(s) Groundwater Encountered **1** **148** 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.

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