

1 LOCATION OF WATER WELL: County: POTTAWATOMIE	Fraction SE 1/4 SE 1/4 SW 1/4	Section Number 35	Township Number T 9 S	Range Number R 12 <u>EW</u>
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Distance and direction from nearest town or city street address of well if located within city?
1 north, 1 west of St. Marys

2 WATER WELL OWNER: **Glenda Eby**
 RR#, St. Address, Box # : **206 W. Mission**
 City, State, ZIP Code : **St. Marys, KS 66536**
 Board of Agriculture, Division of Water Resources
 Application Number:

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

N			
W	---	---	E
	NW	NE	
	---	---	
	SW	SE	
	---	---	
		X	
		S	

4 DEPTH OF COMPLETED WELL: **100'** ft. ELEVATION: _____ ft.
 Depth(s) Groundwater Encountered 1. **55'** ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL **24'** ft. below land surface measured on **mo/day/yr 6-12-95**
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield **5** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter **8 3/4** in. to _____ ft., and _____ in. to _____ ft.
 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 Lawn and garden only 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 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 _____
 7 Fiberglass Threaded _____
 Blank casing diameter **5"** in. to **0-45** ft., Dia **5"** in. to **60-99** 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) _____
 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 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From **45** ft. to **60** ft., From _____ ft. to _____ ft.
 From **99** ft. to **100** ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **24** ft. to **100** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ 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? **north** How many feet? **300'**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Top Soil			
1	5	Clay-Brown			
5	7	Shale-Yellow			
7	11	Shale-Red			
11	12	Shale-Grey			
12	14	Shale-Red			
14	17	Shale-Yellow			
17	29	Shale-Grey			
29	30	Sandstone-Grey			
30	46	Shale-Grey			
46	55	Sandstone-Grey			
55	58	Shale-Grey			

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) **6-12-95** 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) **6-22-95** under the business name of **STRADER DRILLING CO., INC.** by (signature) *Walter Strader*