

Z-2 Found checked MHZ

1. LOCATION OF WATER WELL
 County: Jefferson Fraction: NE 1/4 NE 1/4 NW 1/4 Section Number: 15 Township Number: T 9 S Range Number: R 19 E/W
 Distance and direction from nearest town or city? 3.4 N 1.5 E OF OSKALOOSA Street address of well if located within city?

2. WATER WELL OWNER: MONT WOLF
 RR#, St. Address, Box #: 3224 W. 9th Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Lawrence, Kansas 66044 Application Number:

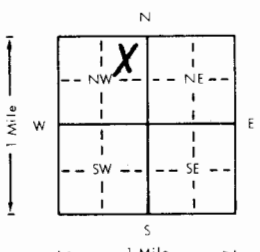
3. DEPTH OF COMPLETED WELL: 200 ft. Bore Hole Diameter: 8 in. to ... ft., and ... in. to ... ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 11 Injection well
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well 12 Other (Specify below)
 Well's static water level: 43 ft. below land surface measured on JANUARY month 3 day 1980 year
 Pump Test Data: Well water was ... ft. after ... hours pumping ... gpm
 Est. Yield: 1 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: 5 in. to 0-40 ft., Dia: 5 in. to 70-180 ft., Dia: X in. to ... ft.
 Casing height above land surface: 24 in., weight: 2.84 lbs./ft. Wall thickness or gauge No: 250
 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 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
 7 Torch cut 10 Other (specify) ...
 Screen-Perforation Dia: 5 in. to ... ft., Dia: ... in. to ... ft., Dia: ... in. to ... ft.
 Screen-Perforated Intervals: From 40 ft. to 70 ft., From ... ft. to ... ft., From ... ft. to ... ft.
 From 180 ft. to 200 ft., From ... ft. to ... ft., From ... ft. to ... ft.
 Gravel Pack Intervals: From 10 ft. to 200 ft., From ... ft. to ... ft., From ... ft. to ... ft.
 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 0 ft. to 10 ft., From ... ft. to ... ft., From ... ft. to ... ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 15 Oil well/Gas well
 3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines 16 Other (specify below)
 Direction from well: SOUTH 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: Jacuzzi Model No: 754B/52 HP: 3/4 Volts: 230
 Depth of Pump Intake: 190 ft. Pumps Capacity rated at: 10 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 JANUARY month 3 day 1980 year
 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 JAN month 8 day 1980 year under the business name of STAADER DALG CO INC by (signature) Dale Ashren

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



FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	TOP SOIL			
2	18	CLAY			
18	43	SHALE, GREY			
43	49	LIMESTONE, GREY			
49	150	SHALE, GREY, LIMESTONE, GREY			
150	200	SANDY SHALE			

Depth(s) Groundwater Encountered 1. 43 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.

SK 1045 1030