

1 LOCATION OF WATER WELL: County: JEFFERSON	Fraction SE 1/4 SW 1/4 NE 1/4	Section Number 17	Township Number T 9 S	Range Number R 19 EW
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Distance and direction from nearest town or city street address of well if located within city?

3 north, 3/8 west of Oskaloosa

2 WATER WELL OWNER: **David Mueller**
 RR#, St. Address, Box #: **Rt. 2 Box 199**
 City, State, ZIP Code: **Oskaloosa, KS 66066**

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
S	S

4 DEPTH OF COMPLETED WELL: **120'** ft. ELEVATION: _____ ft.

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

WELL'S STATIC WATER LEVEL: **59'** ft. below land surface measured on mo/day/yr **8-09-94**

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

Est. Yield **3** 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
2 Irrigation	4 Industrial	7 Lawn and garden only
9 Dewatering	10 Monitoring well	12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes _____ No If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass		Threaded _____

Blank casing diameter: **5"** in. to **0-95** ft., Dia _____ in. to _____ 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 **95** ft. to **120** ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **24** ft. to **120** ft., From _____ ft. to _____ ft.

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

Grout Intervals: From **0** 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? **135'**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Top Soil	112	120	Limestone-Grey
2	32	Clay-Brown			
32	33	Boulders			
33	43	Clay-Brown			
43	46	Fine Sand-Coarse Sand-Boulders			
46	51	Clay-Brown			
51	59	Limestone-Brown			
59	61	Shale-Grey			
61	65	Limestone-Grey			
65	87	Shale-Grey			
87	88	Limestone-Grey			
88	95	Shale-Grey			
95	99	Sandstone-Grey			
99	102	Shale-Grey			
102	112	Sandstone-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) **8-09-94** 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) **9-16-94** under the business name of **STRADER DRILLING CO., INC.** by (signature) *Dale Skren*