

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>Rooks</u>	<u>SE</u> 1/4 <u>SW</u> 1/4 <u>SW</u> 1/4	<u>9</u>	T <u>10</u> S	R <u>18</u> <u>EW</u>

Distance and direction from nearest town or city? 3 mi south, & 2 mi west  
 Street address of well if located within city?

2 WATER WELL OWNER: Terry Ostrom  
 RR#, St. Address, Box # : Rt 1  
 City, State, ZIP Code : Plainville, KS 67663  
 Board of Agriculture, Division of Water Resources  
 Application Number:

3 DEPTH OF COMPLETED WELL: 74 ft. Bore Hole Diameter: 12 in. to . . . . . ft., and . . . . . in. to . . . . . 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 . . . . . 33 ft. below land surface measured on . . . . . July . . . . . month . . . . . 17 . . . . . day . . . . . 1981 . . . . . year  
 Pump Test Data : Well water was . . . . . 33 ft. after . . . . . 2 . . . . . hours pumping . . . . . 20 . . . . . gpm  
 Est. Yield 20 gpm: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm

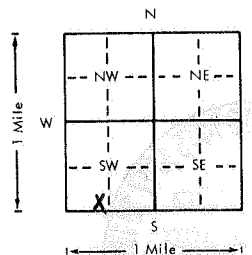
4 TYPE OF BLANK CASING USED:  
 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)  
 Casing Joints: Glued  Clamped . . . . .  
 Welded . . . . .  
 Threaded . . . . .  
 Blank casing dia . . . . . 5 . . . . . in. to . . . . . 40 . . . . . ft., Dia . . . . . 5 . . . . . in. to . . . . . 74 . . . . . 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 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) . . . . .  
 12 None used (open hole)  
 Screen or Perforation Openings Are:  
 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 11 None (open hole)  
 Screen-Perforation Dia . . . . . 5 . . . . . in. to . . . . . 70 . . . . . 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.  
 Gravel Pack Intervals: From . . . . . 10 . . . . . ft. to . . . . . 74 . . . . . 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 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy 7 Sewage lagoon 8 Feed yard 9 Livestock pens 10 Fuel storage 11 Fertilizer storage 12 Insecticide storage 13 Watertight sewer lines 14 Abandoned water well 15 Oil well/Gas well 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 . . . . . Model No. . . . . HP . . . . . Volts . . . . .  
 Depth of Pump Intake . . . . . ft. Pumps Capacity rated at . . . . . 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 . . . . . July . . . . . month . . . . . 17 . . . . . day . . . . . 1981 . . . . . year  
 and this record is true to the best of my knowledge and belief? Kansas Water Well Contractor's License No. . . . . 285  
 This Water Well Record was completed on . . . . . July . . . . . month . . . . . 26 . . . . . day . . . . . 1981 . . . . . year under the business name of Jones Brothers Water Well Service by (signature) James F. Jones

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		TO		LITHOLOGIC LOG	FROM		TO		LITHOLOGIC LOG
		0	7			top soil				
	7	22			sand stone					
	22	68			sand					
	68	74			shale					



ELEVATION: hill side  
 Depth(s) Groundwater Encountered 1. . . . . 34 . . . . . ft. 2. . . . . 68 . . . . . 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.