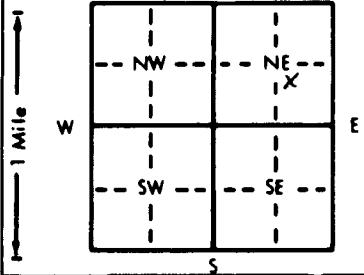


1 LOCATION OF WATER WELL: Fraction NW 1/4 SE 1/4 NE 1/4 Section Number 36 Township Number T 11 S Range Number R 29 **EW**
 County: GOVE

Distance and direction from nearest town or city street address of well if located within city?
CONFIRMED BY GMD #4

2 WATER WELL OWNER: MADELENE ANN UMSCHIED
 RR#, St. Address, Box #: 16 FLIZITA KAISER - 600 W. 15th Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: SALINA, KS 67401 Application Number:

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



4 DEPTH OF COMPLETED WELL unknown ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL DRY _____ ft. below land surface measured on mo/day/yr
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter _____ 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
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well
This well was never used for irrigat. or only for cattle in pasture
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____
 Water Well Disinfected? Yes No _____

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

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: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From _____ ft. to _____ 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 _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination? Removed well + casing filled with gravel and filled with cement
 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 12 Fertilizer storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below) NONE
its a pasture, no source of contamination
 Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
		RECEIVED			
		AUG 14 1989			
		DIVISION OF ENVIRONMENT			

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) May 10, 1989 and this record is true to the best of my knowledge and belief, Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) May 15, 1989 under the business name of _____ by (signature) Delma Kaiser

OFFICE USE ONLY
T
R
EW
SEC.
1/4
1/4
1/4