

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: OTTAWA	SE ¼ NE ¼ NE ¼	6	T 11 S	R 3W EW

Distance and direction from nearest town or city street address of well if located within city?
 720 MARILN

2 WATER WELL OWNER: **BILL CARGILL**
 RR#, St. Address, Box # : **720 MARILN**
 City, State, ZIP Code : **MINNEAPOLIS, KS. 67467**
 Board of Agriculture, Division of Water Resources
 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: 120 ft. ELEVATION:
	Depth(s) Groundwater Encountered 1. 80 ft. 2. . ft. 3. . ft.
	WELL'S STATIC WATER LEVEL 7.5 ft. below land surface measured on mo/day/yr 9-13-00
	Pump test data: Well water was 80 ft. after 2 hours pumping 15 gpm
	Est. Yield 50+ gpm: Well water was . ft. after . hours pumping . gpm
	Bore Hole Diameter: 9 in. to 120 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 <u>7 Domestic (lawn & garden)</u> 10 Monitoring well
	Was a chemical/bacteriological sample submitted to Department? Yes. No. <input checked="" type="checkbox"/> ; If yes, mo/day/yrs sample was submitted
	Water Well Disinfected? Yes <input checked="" type="checkbox"/> 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.
<u>2 PVC</u>	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded
		7 Fiberglass		Threaded

Blank casing diameter **5** in. to **100** ft., Dia in. to . ft., Dia in. to . ft.

Casing height above land surface: **16** in., weight **160** lbs./ft. Wall thickness or gauge No. **SDR 26**

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	<u>7 PVC</u>	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	<u>3 Mill slot .025</u>	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 **100** 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
<u>3 Watertight sewer lines</u>	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage	

Direction from well? **EAST** How many feet? **25**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	FILL DIRT			
2	4	TOP SOIL			
4	12	CLAY BROWN			
12	14	CLAY GRAY LIGHT			
14	24	CLAY LIGHT TAN			
24	118	SANDSTONE TAN			
118	120	SHALE GRAY			

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) **9-13-00** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. **388** This Water Well Record was completed on (mo/day/yr) **9-13-00** under the business name of **PESTINGER PUMP SERVICE** by (signature) *[Signature]*

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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.