

PARADISE

1 LOCATION OF WATER WELL
 County: RUSSELL Fraction: NORTH WEST 1/4 QUARTER 1/4 Section Number: 36 Township Number: T 12 S Range Number: R 14 EW

Distance and direction from nearest town or city? 5 MILES NORTH OF RUSSELL + 1/2 EAST Street address of well if located within city?

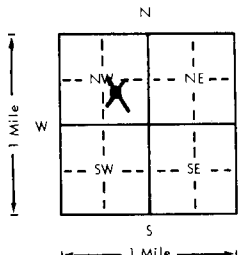
2 WATER WELL OWNER: LARRY SPEERE
 RR#, St. Address, Box #: RT 1 BOX 106A Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: RUSSELL KANSAS 67665 Application Number:

3 DEPTH OF COMPLETED WELL: 13 ft. Bore Hole Diameter: 4 1/2" in. to 10 ft., and 36" in. to 13 ft.
 Well Water to be used as:
 Domestic Feedlot Oil field water supply Air conditioning Injection well
 Irrigation Industrial Lawn and garden only Dewatering Other (Specify below)
 Observation well
 Well's static water level: 9 ft. below land surface measured on 8 month 12 day 1980 year
 Pump Test Data: Well water was 9 ft. after 3 hours pumping 8 gpm
 Est. Yield 15 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:
 Steel RMP (SR) Asbestos-Cement Concrete tile Casing Joints: Glued _____ Clamped _____
 PVC ABS Fiberglass Other (specify below) _____ Welded _____
 10' ALUMINUM CULVERT SET ON CONCRETE TILE Threaded _____
 Blank casing dia: 30" in. to 13 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 6" in., weight _____ lbs./ft. Wall thickness or gauge No _____
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless steel Fiberglass RMP (SR) Asbestos-cement
 Brass Galvanized steel Concrete tile ABS None used (open hole)
 Screen or Perforation Openings Are:
 Continuous slot Mill slot Gauzed wrapped Saw cut None (open hole)
 Louvered shutter Key punched Wire wrapped Drilled holes Other (specify) _____
 Torch cut Other (specify) _____
 Screen-Perforation Dia: _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 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 13 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

5 GROUT MATERIAL: Neat cement Cement grout Bentonite Other _____
 Grouted Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 Septic tank Cess pool Sewage lagoon Fuel storage Abandoned water well
 Sewer lines Seepage pit Feed yard Fertilizer storage Oil well/Gas well
 Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below) _____
 Watertight sewer lines _____
 Direction from well: SW How many feet: 300 ? Water Well Disinfected? Yes _____ No
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____ If yes, date sample was submitted: JULY month _____ day 1980 year: Pump Installed? Yes No _____
 If Yes: Pump Manufacturer's name: SEARS Model No. _____ HP 3/4 Volts 120
 Depth of Pump Intake: 11 ft. Pumps Capacity rated at: 8 gal./min.
 Type of pump: Submersible Turbine Jet Centrifugal Reciprocating 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 _____ month SEPT day _____ year 1979
 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 _____ month _____ day _____ year under the business name of DUG BY LANDOWNER by (signature) Larry Speere

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

 FROM _____ TO _____ LITHOLOGIC LOG _____ FROM _____ TO _____ LITHOLOGIC LOG _____
 ELEVATION: _____

Depth(s) Groundwater Encountered: 9 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.

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