

1 LOCATION OF WATER WELL
 County: Ellis Fraction: NW 1/4 NE 1/4 SE 1/4 Section Number: 32 Township Number: T 12 Range Number: R 20 E 10
 Distance and direction from nearest town or city? 1.5 N - 1/4 mi West Street address of well if located within city? Ellis

2 WATER WELL OWNER: Adair Schubert
 RR, St. Address, Box # RFD Board of Agriculture, Division of Water Resources
 City, State, ZIP Code Ellis, Ks 67637 Application Number:

3 DEPTH OF COMPLETED WELL: 30 ft. Bore Hole Diameter: 10 in. to _____ ft., and _____ in. to _____ ft.
 Well Water to be used as:
 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 11 Injection well
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well 12 Other (Specify below)
 Well's static water level 11 ft. below land surface measured on June month 30 day 1980 year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 30 gpm: Well water was 11 ft. after 30 min hours pumping baling gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded
 2 PVC 4 ABS 7 Fiberglass Styrene 200 Threaded
 Blank casing dia 5 in. to 0 ft., Dia 10 in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 18 in., weight _____ lbs./ft. Wall thickness or gauge No 1/2
TYPE OF SCREEN OR PERFORATION MATERIAL: X 7 PVC 10 Asbestos-cement
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) Styrene 200
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
Screen or Perforation Openings Are:
 1 Continuous slot 3 Mill slot 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) Styrene 200
 Screen-Perforation Dia 5 in. to 10 ft., Dia 30 in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 10 ft. to 30 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 10 ft. to 30 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 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)
 Direction from well North How many feet 5000 ? Water Well Disinfected? Yes No
 Was a chemical/bacteriological sample submitted to Department? Yes No No If yes, date sample was submitted _____ month _____ day _____ year Pump Installed? Yes No
 If Yes: Pump Manufacturer's name No pump installed Model No. _____ HP _____ Volts _____
 Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ gpm/min.
 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating Wind mill 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 June month 30 day 1980 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 276
 This Water Well Record was completed on June 30 month _____ day 1980 year under the business name of Lucas Water Well Drilling by (signature) John Lucas

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

| FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHOLOGIC LOG |
|------|----|---------------------------|------|----|----------------|
| 0 | 2 | Top soil | | | |
| 2 | 12 | Clay L. Brown | | | |
| 12 | 20 | F. Shy Sand w/ c. S. Sand | | | |
| 20 | 28 | C. Sand w/ c. gravel | | | |
| 28 | 30 | Dark B. Shales | | | |

ELEVATION: _____

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)

OFFICE USE ONLY

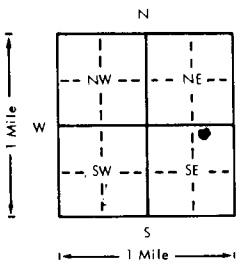
T

R

SEC.

32

NW 1/4 NE 1/4 SE 1/4



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.