

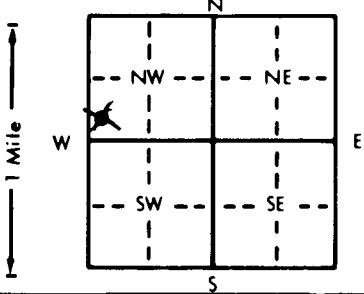
1 LOCATION OF WATER WELL: Fraction SW 1/4 SW 1/4 NW 1/4 Section Number 11 Township Number T 12 S Range Number R 5 E/W

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

1 mile east & 1/2 mile North of Tescott, KS

2 WATER WELL OWNER: Scott Deckert
 RR#, St. Address, Box # : 377 N. Minnesota Ave. Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Tescott, KS 67484 Application Number: N/A

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



4 DEPTH OF COMPLETED WELL 100 ft. ELEVATION: _____

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 55 ft. below land surface measured on mo/day/yr 6/3/97
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield .15 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter 8 in. to 100 ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No ; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes No _____

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped _____
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
 PVC 4 ABS 7 Fiberglass Threaded _____

Blank casing diameter 5 in. to 90 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 12 in., weight 2.37 lbs./ft. Wall thickness or gauge No. 214

TYPE OF SCREEN OR PERFORATION MATERIAL: 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 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From 90 ft. to 100 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 20 ft. to 100 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other _____
 Grout Intervals: From 0 ft. to 20 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
 1 Septic tank Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage _____

Direction from well? East How many feet? 150 ft.

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Topsoil			
3	5	Tan Clay			
5	31	Brown Sandstone			
31	62	Gray Sandstone			
62	98	Tan Sandstone			
98	100	Gray Shale			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6/3/97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 138 This Water Well Record was completed on (mo/day/yr) 6/12/97 under the business name of Peterson Irrigation, Inc. by (signature) Mike Peterson

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: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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