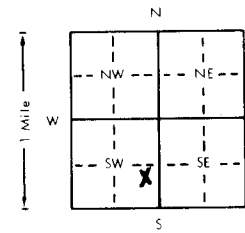


LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Ness</u>		<u>NE 1/4 SE 1/4 SW 1/4</u>	<u>10</u>	<u>T 16 S</u>	<u>R 21 NW</u>
Distance and direction from nearest town or city? <u>4 East, 3 North, 1 1/2 East of Brownell</u>			Street address of well if located within city?		
WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code			Board of Agriculture, Division of Water Resources Application Number:		
<u>Arnold Linden</u> <u>Dighton, Kansas 67839</u>					
3 DEPTH OF COMPLETED WELL <u>120</u> ft. Bore Hole Diameter <u>9</u> in. to <u>120</u> ft. and <u>  </u> in. to <u>  </u> ft.					
Well Water to be used as: <input checked="" type="radio"/> Domestic <input type="radio"/> Feedlot <input type="radio"/> Public water supply <input type="radio"/> Air conditioning <input type="radio"/> Injection well <input type="radio"/> Irrigation <input type="radio"/> Industrial <input type="radio"/> Oil field water supply <input type="radio"/> Dewatering <input type="radio"/> Other (Specify below) <input type="radio"/> Lawn and garden only <input type="radio"/> Observation well <u>stock well</u>					
Well's static water level <u>85</u> ft. below land surface measured on <u>June</u> month <u>7</u> day <u>1980</u> year					
Pump Test Data Est. Yield <u>15</u> gpm: Well water was <u>89</u> ft. after <u>1</u> hours pumping. <u>15</u> gpm Well water was <u>  </u> ft. after <u>  </u> hours pumping <u>  </u> gpm					
4 TYPE OF BLANK CASING USED: <u>2</u> <input type="radio"/> Steel <input type="radio"/> RMP (SR) <input type="radio"/> Wrought iron <input type="radio"/> Concrete tile Casing Joints: Glued <input checked="" type="checkbox"/> Clamped <input type="checkbox"/> <u>2 PVC</u> <input type="radio"/> ABS <input type="radio"/> Asbestos-Cement <input type="radio"/> Other (specify below) Welded <input type="checkbox"/> <u>  </u> <input type="radio"/> Fiberglass <input type="radio"/> Threaded <input type="checkbox"/>					
Blank casing dia <u>5</u> in. to <u>100</u> ft. Dia <u>  </u> in. to <u>  </u> ft. Dia <u>  </u> in. to <u>  </u> ft.					
Casing height above land surface <u>24</u> in. weight <u>200</u> lbs./ft. Wall thickness or gauge No <u>26</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL: <u>7</u> <input type="radio"/> Steel <input type="radio"/> Stainless steel <input type="radio"/> Fiberglass <input type="radio"/> RMP (SR) <input type="radio"/> Asbestos-cement <input type="radio"/> Brass <input type="radio"/> Galvanized steel <input type="radio"/> Concrete tile <input type="radio"/> ABS <input type="radio"/> Other (specify) <u>10</u> Screen or Perforation Openings Are: <u>8</u> <input type="radio"/> Gauzed wrapped <input type="radio"/> Saw cut <input type="radio"/> None (open hole) <input type="radio"/> Continuous slot <input type="radio"/> Mill slot <input type="radio"/> Wire wrapped <input type="radio"/> Drilled holes <input type="radio"/> Louvered shutter <input type="radio"/> Key punched <input type="radio"/> Torch cut <input type="radio"/> Other (specify) <u>10</u>					
Screen-Perforation Dia <u>5 1/2</u> in. to <u>120</u> ft. Dia <u>  </u> in. to <u>  </u> ft. Dia <u>  </u> in. to <u>  </u> ft.					
Screen-Perforated Intervals: From <u>60</u> ft. to <u>70</u> ft. From <u>  </u> ft. to <u>  </u> ft. From <u>  </u> ft. to <u>  </u> ft.					
From <u>100</u> ft. to <u>120</u> ft. From <u>  </u> ft. to <u>  </u> ft. From <u>  </u> ft. to <u>  </u> ft.					
Gravel Pack Intervals: From <u>40</u> ft. to <u>120</u> ft. From <u>  </u> ft. to <u>  </u> ft. From <u>  </u> ft. to <u>  </u> ft.					
From <u>  </u> ft. to <u>  </u> ft. From <u>  </u> ft. to <u>  </u> ft. From <u>  </u> ft. to <u>  </u> ft.					
5 GROUT MATERIAL: <u>1</u> <del>Heat cement</del> <input type="radio"/> Cement grout <input type="radio"/> Bentonite <input type="radio"/> Other <u>  </u>					
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft. From <u>  </u> ft. to <u>  </u> ft. From <u>  </u> ft. to <u>  </u> ft.					
What is the nearest source of possible contamination: <u>none</u> <input type="radio"/> Septic tank <input type="radio"/> Cess pool <input type="radio"/> Sewage lagoon <input type="radio"/> Fuel storage <input type="radio"/> Abandoned water well <input type="radio"/> Sewer lines <input type="radio"/> Seepage pit <input type="radio"/> Feed yard <input type="radio"/> Fertilizer storage <input type="radio"/> Oil well/Gas well <input type="radio"/> Lateral lines <input type="radio"/> Pit privy <input type="radio"/> Livestock pens <input type="radio"/> Insecticide storage <input type="radio"/> Other (specify below) <input type="radio"/> Watertight sewer lines					
Direction from well <u>  </u> How many feet <u>  </u> ? Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>					
Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, date sample <u>  </u>					
was submitted <u>  </u> month <u>  </u> day <u>  </u> year: Pump Installed? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>					
If Yes: Pump Manufacturer's name <u>  </u> Model No. <u>  </u> HP <u>  </u> Volts <u>  </u>					
Depth of Pump Intake <u>  </u> ft. Pumps Capacity rated at <u>  </u> gal./min.					
Type of pump: <input type="radio"/> Submersible <input type="radio"/> Turbine <input type="radio"/> Jet <input type="radio"/> Centrifugal <input type="radio"/> Reciprocating <input type="radio"/> Other					
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on <u>6</u> month <u>7</u> day <u>80</u> year					
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>199</u> <u>80</u>					
This Water Well Record was completed on <u>  </u> month <u>  </u> day <u>  </u> year under the business name of <u>Karst Water Well Serv.</u> by (signature) <u>MB Karst</u>					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		LITHOLOGIC LOG			
					
FROM <u>0</u> TO <u>4</u>		topsoil			
FROM <u>4</u> TO <u>49</u>		clay			
FROM <u>49</u> TO <u>62</u>		white clay			
FROM <u>62</u> TO <u>67</u>		white rock			
FROM <u>67</u> TO <u>95</u>		white clay and rock			
FROM <u>95</u> TO <u>114</u>		white rock			
FROM <u>114</u> TO <u>120</u>		blue shale			
ELEVATION: <u>slope</u>					
Depth(s) Groundwater Encountered <u>1</u> <u>62</u> ft. <u>2</u> <u>95</u> ft. <u>3</u> <u>  </u> ft. <u>4</u> <u>  </u> 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.					

OFFICE USE ONLY

T

16

R

21

EW

SEC

10

NE 1/4 SE 1/4 SW 1/4