

1 LOCATION OF WATER WELL  
 County: Ness Fraction SW  $\frac{1}{4}$  NW  $\frac{1}{4}$  NE  $\frac{1}{4}$  Section Number 13 Township Number T 16 S Range Number R 26 E

Distance and direction from nearest town or city? 1 East, 2 North of Utica, Kansas  
 Street address of well if located within city?

2 WATER WELL OWNER: Gary Evel  
 RR#, St. Address, Box #: R.R.  
 City, State, ZIP Code: Utica, Kansas 67584  
 Board of Agriculture, Division of Water Resources  
 Application Number:

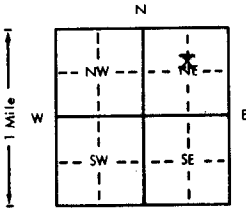
3 DEPTH OF COMPLETED WELL: 40 ft. Bore Hole Diameter: 9 in. to ..... ft. and ..... in. to ..... ft.  
 Well Water to be used as: 1 5 Public water supply 8 Air conditioning 11 Injection well  
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well  
 Well's static water level: 32 ft. below land surface measured on September month 2 day 1981 year  
 Pump Test Data: Well water was 32 ft. after 1 hours pumping 4 gpm  
 Est. Yield 4 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

4 TYPE OF BLANK CASING USED: 2 5 Wrought iron 8 Concrete tile Casing Joints: X Glued ..... Clamped .....  
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....  
2 PVC 4 ABS 7 Fiberglass ..... Threaded .....  
 Blank casing dia: 5 in. to 30 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface: 24 in., weight 200 lbs./ft. Wall thickness or gauge No. .21  
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 7 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: 8 5 Gauzed wrapped 8 Saw cut 11 None (open hole)  
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes  
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....  
 Screen-Perforation Dia: 5 in. to 40 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Screen-Perforated Intervals: From 30 ft. to 40 ft., From ..... ft. to ..... ft.  
 Gravel Pack Intervals: From 20 ft. to 40 ft., From ..... ft. to ..... ft.

5 GROUT MATERIAL: 1 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: NONE 10 Fuel storage 14 Abandoned water well  
1 Septic tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 15 Oil well/Gas well  
2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 16 Other (specify below)  
3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines  
 Direction from well: ..... How many feet: ..... ? Water Well Disinfected? Yes X No  
 Was a chemical/bacteriological sample submitted to Department? Yes ..... No X If yes, date sample  
 was submitted ..... month ..... day ..... year: Pump installed? Yes ..... No X  
 If Yes: Pump Manufacturer's name: ..... Model No. .... HP ..... Volts .....  
 Depth of Pump Intake: ..... ft. Pumps Capacity rated at ..... gal./min.  
 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 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 September month 2 day 1981 year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 199  
 This Water Well Record was completed on September month 23 day 1981 year under the business  
 name of Karst Water Well Service by (signature) [Signature]

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



FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Topsoil			
3	19	Brown clay			
19	32	Sand and clay			
32	34	Green clay			
34	37	Brown clay			
37	40	Blue shale			

ELEVATION: Upland

Depth(s) Groundwater Encountered 1 37 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.

OFFICE USE ONLY  
T 16  
R 26  
SEC 13  
SW 1/4  
NW 1/4  
SE 1/4  
NE 1/4