

1 LOCATION OF WATER WELL
 County: Ness Fraction: 1/4 NW 1/4 NW 1/4 NW 1/4 Section Number: 36 Township Number: T 17 S Range Number: R 21W EW
 Distance and direction from nearest town or city? 3 S, 2 W of McCracken, Kansas Street address of well if located within city? McCracken

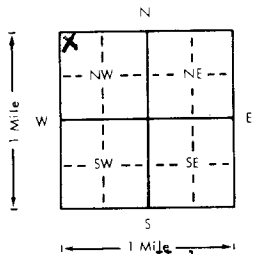
2 WATER WELL OWNER: Pat Casey
 RR#, St. Address, Box #: Route 1 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: McCracken, Kansas 67556 Application Number: None

3 DEPTH OF COMPLETED WELL: 245 ft. Bore Hole Diameter: 8 in. to 245 ft. and _____ in. to _____ ft.
 Well Water to be used as:
1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 7 Lawn and garden only 10 Observation well
 Well's static water level 205 ft. below land surface measured on June month 21 day 1979 year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 10 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued _____ Clamped _____
 2 PVC 4 ABS 7 Fiberglass 9 Other (specify below) _____ Welded _____
 Threaded _____
 Casing dia 5 in. to 205 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface 12 in., weight 2.8 lbs./ft. Wall thickness or gauge No. Sch. 40
TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____
 12 None used (open hole)
Screen or Perforation Openings Are:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 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) _____
 Screen-Perforation Dia 5 in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 205 ft. to 245 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 10 ft. to 245 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 South How many feet 60? Water Well Disinfected? Yes _____ No _____
 Was a chemical/bacteriological sample submitted to Department? No If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No _____
 If Yes: Pump Manufacturer's name Goulds Model No. 7EH HP 3/4 Volts 230
 Depth of Pump Intake 242 ft. Pumps Capacity rated at 7 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 June month 21 day 1979 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186
 This Water Well Record was completed on March month 17 day 1980 year under the business name of Kellys Water Well Service by (signature) Kelly Price

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

 FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG
0 5 Clay _____ _____
5 205 Shale _____ _____
205 245 Sand rock and shale streaks _____ _____
Metaceous well
2152
2147
 ELEVATION: Unknown
 Depth(s) Groundwater Encountered 1. 205 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
17
R
31
SEC.
362
NW 1/4
SW 1/4
SE 1/4
NE 1/4