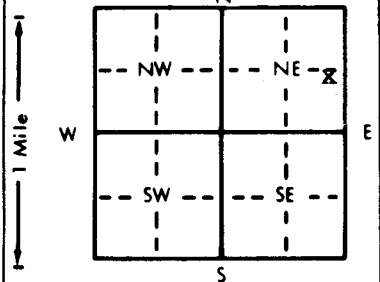


1 LOCATION OF WATER WELL: County: **SCOTT** Fraction: **NE 1/4 SE 1/4 NE 1/4** Section Number: **9** Township Number: **T 18 S** Range Number: **R 34 E/W**

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

2 WATER WELL OWNER: **ROGER HEIM**
 RR#, St. Address, Box #: **1701 N Cherokee Road** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **Modoc, KS 67863** Application Number:

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



4 DEPTH OF COMPLETED WELL: **158** ft. ELEVATION: ft.
 Depth(s) Groundwater Encountered: **117.8"** ft. 2. ft. 3. ft.
 WELL'S STATIC WATER LEVEL: **117.8"** below land surface measured on mo/day/yr
 Pump test data: Well water was **120'** ft. after **6** hours pumping **30** gpm
 Est. Yield gpm: Well water was ft. after hours pumping gpm
 Bore Hole Diameter: **9 5/8** in. to **0** ft., and **158** in. to ft.
 WELL WATER TO BE USED AS:
 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial
 5 Public water supply 6 Oil field water supply 7 Lawn and garden only
 8 Air conditioning 9 Dewatering 10 Monitoring well
 11 Injection well 12 Other (Specify below)
 Was a chemical/bacteriological sample submitted to Department? Yes.....No.....
 Water Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED:
 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)
 Blank casing diameter: **5"** in. to **158'** ft., Dia in. to ft., Dia in. to ft.
 Casing height above land surface: **2'** in., weight lbs./ft. Wall thickness or gauge No.
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 PVC 6 Concrete tile 7 Fiberglass 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify)
 SCREEN OR PERFORATION OPENINGS ARE: **.25**
 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify)
 SCREEN-PERFORATED INTERVALS: From **158** ft. to **138** ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From **158** ft. to **118** ft., From **94** ft. to **34** ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
 Grout Intervals: From **118** ft. to **94** ft., From **34** ft. to **6** ft., From ft. to ft.
 What is the nearest source of possible contamination:
 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)
 Direction from well? **SE** How many feet? **250**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	25	clay			
25	34	gyp			
34	40	clay			
40	55	fine sand			
55	65	sand stone			
65	70	clay & sand stone			
70	90	gyp			
90	94	sand stone			
94	98	gyp			
98	105	fine sand			
105	153	med sand			
153	158	coarse sand			
158	160	yellow 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) **11/14/98** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **640** This Water Well Record was completed on (mo/day/yr) **12-30-98** under the business name of **SAGER'S PUMP SERVICE** by (signature) *Chad Sager*

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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