

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>Rush</u>	<u>SW</u> 1/4 <u>SW</u> 1/4 <u>NE</u> 1/4	<u>19</u>	<u>T 19 S</u>	<u>R 18</u> <del>EW</del>

Distance and direction from nearest town or city? 5 South, 2 West, 1/2 South of Rush Center, Kansas Street address of well if located within city?

2 WATER WELL OWNER: George Keener  
 RR#, St. Address, Box #: R.R.  
 City, State, ZIP Code: Nekoma, Kansas 67559  
 Board of Agriculture, Division of Water Resources  
 Application Number:

3 DEPTH OF COMPLETED WELL: 180 ft. Bore Hole Diameter: 2 in. to ..... ft., and ..... in. to ..... ft.  
 Well Water to be used as: 12 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 Stock well  
 Well's static water level: 104 ft. below land surface measured on May month 15 day 1980 year  
 Pump Test Data: Well water was 104 ft. after 1 hours pumping 15 gpm  
 Est. Yield 15 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

4 TYPE OF BLANK CASING USED: 2 5 Wrought iron 8 Concrete tile Casing Joints: 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 160 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. .26  
 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 180 ft. Dia ..... in. to ..... ft. Dia ..... in. to ..... ft.  
 Screen-Perforated Intervals: From 160 ft. to 180 ft., From ..... ft. to ..... ft.  
 Gravel Pack Intervals: From 120 ft. to 180 ft., From ..... ft. to ..... ft.

5 GROUT MATERIAL: 1 1 Neat cement 10 2 Cement grout 3 Bentonite 4 Other .....  
 Grouted Intervals: 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) NOTE  
 3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines  
 Direction from well ..... How many feet ..... ? Water Well Disinfected? Yes  No   
 Was a chemical/bacteriological sample submitted to Department? Yes ..... No  If yes, date sample  
 was submitted ..... month ..... day ..... year: Pump Installed? Yes ..... No   
 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 May month 15 day 1980 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 July month 21 day 1980 year under the business  
 name of Karst Water Well Service by (signature) MB Karst

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	4	Topsoil			
	4	26	Clays			
	26	108	Blue shale			
	118	163	White Dakota clay			
	163	179	Sandstone			
	179	180	White Dakota clay			

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: Upland  
 ELEVATION: .....  
 Depth(s) Groundwater Encountered 1. 163 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  
19  
R  
18  
EWD  
SEC  
19  
SW 1/4  
SW 1/4  
NE 1/4