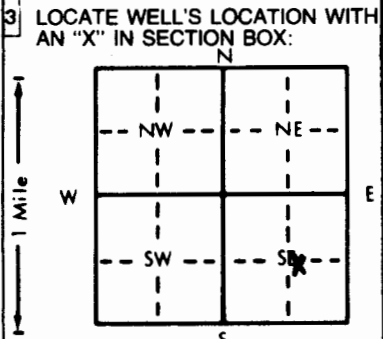


SE 1/4 of 4-19-22

1 LOCATION OF WATER WELL: Fraction NW 1/4 SE 1/4 SE 1/4 Section Number 4 Township Number T 19 S Range Number R 22 E/W
 County: NESS

Distance and direction from nearest town or city street address of well if located within city?
3 miles West 2 South of BAZINE KANSAS 67516

2 WATER WELL OWNER: ELAINE GROSS Board of Agriculture, Division of Water Resources
 RR#, St. Address, Box #: BAZINE KANSAS 67516 Application Number: 6175
 City, State, ZIP Code: BAZINE KANSAS 67516



4 DEPTH OF COMPLETED WELL 52' ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 29' ft. below land surface measured on mo/day/yr 11-13-90
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter _____ in. to _____ ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 11 Injection well
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No If yes, mo/day/yr sample was sub-
 mitted _____ Water Well Disinfected? Yes No _____

5 TYPE OF BLANK CASING USED:
 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
 2 PVC 4 ABS 7 Fiberglass Threaded _____
 Blank casing diameter 16 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height _____ land surface FLUSH 0' in., weight _____ lbs./ft. Wall thickness or gauge No. _____
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 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:
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 10 Other (specify) NA
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) _____
 13 Insecticide storage _____
 Direction from well? EAST How many feet? 1,320'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
52'	29'	SAND & GRAVEL			
29'	10'	CEMENT			
10'	8' to 6'	DIRT (CLEAN)			
6' to 8'	0'	CEMENT			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 11-13-90 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) 11-24-90 under the business name of _____ by (signature) Raymond Gross (Son)

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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

plugged by Raymond Gross (son)

OFFICE USE ONLY
T
R
EW
SEC