

1 LOCATION OF WATER WELL
 County: Edwards Fraction SE 1/4 SE 1/4 SE 1/4 Section Number 20 Township Number T 24 S Range Number R 18 EW
 Distance and direction from nearest town or city? 3 W of Lewis Street address of well if located within city?

2 WATER WELL OWNER: Alvin Wheaton
 RR#, St. Address, Box # : _____ Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Lewis, Mo. 67552 Application Number: _____

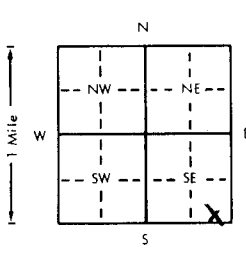
3 DEPTH OF COMPLETED WELL: 72 ft. Bore Hole Diameter: 11 in. to 72 ft., and _____ in. to _____ ft.
 Well Water to be used as:
 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well
 Well's static water level: 42 ft. below land surface measured on 7 month 23 day 80 year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield NA gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:
 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued Clamped _____
 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 Fiberglass _____ Threaded _____
 Blank casing dia: 5 in. to 52 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 18 in., weight _____ lbs./ft. Wall thickness or gauge No. 258
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 PVC 10 Asbestos-cement
 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____
 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
 Screen or Perforation Openings Are:
 Continuous slot 3 Mill slot 5 Gauzed wrapped Saw cut 11 None (open hole)
 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 Torch cut 10 Other (specify) _____
 Screen-Perforation Dia: 5 in. to 72 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 52 ft. to 72 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 10 ft. to 72 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

5 GROUT MATERIAL: 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:
 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well
 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well
 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)
 Watertight sewer lines 13 _____
 Direction from well: NW How many feet: 75 ? Water Well Disinfected? Yes HTH No
 Was a chemical/bacteriological sample submitted to Department? Yes No _____ If yes, date sample was submitted: 7 month 23 day 80 year Pump Installed? Yes No _____
 If Yes: Pump Manufacturer's name: Red Jacket Model No. UCC HP 3/4 Volts 230
 Depth of Pump Intake: 63 ft. Pumps Capacity rated at: 18 gal./min.
 Type of pump: Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other _____

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on 8 month 25 day 80 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134
 This Water Well Record was completed on 9 month 8 day 80 year under the business name of Rosencrantz - Bemis by (signature) Lora Dodson

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



| FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHOLOGIC LOG |
|------|----|------------------|------|----|----------------|
| 0 | 3 | Sandy top soil | | | |
| 3 | 28 | Sandy brown clay | | | |
| 28 | 38 | Brown clay | | | |
| 38 | 42 | Sand | | | |
| 42 | 72 | Sand & gravel | | | |

ELEVATION: _____

Depth(s) Groundwater Encountered 1. 42 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
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R
18
SEC
20
SE 1/4
SE 1/4
SE 1/4