

1 LOCATION OF WATER WELL
 County: Stafford Fraction $\frac{1}{4}$ C $\frac{1}{4}$ NE $\frac{1}{4}$ Section Number 30 Township Number T 25 S Range Number R 13 W

Distance and direction from nearest town or city? 9 3/4 South - 2 1/4 West from St. John, Mo. Street address of well if located within city?

2 WATER WELL OWNER: Rev Boudien
 RR#, St. Address, Box #: St. John, Mo 67576
 City, State, ZIP Code: St. John, Mo 67576
 Board of Agriculture, Division of Water Resources
 Application Number: 33244

3 DEPTH OF COMPLETED WELL: 120 ft. Bore Hole Diameter: 29 in. to 123 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: 14 ft. below land surface measured on _____ month _____ day _____ year
 Pump Test Data: Well water was 34 ft. after _____ hours pumping _____ gpm
 Est. Yield 1400 gpm: Well water was 37 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 6 Asbestos-Cement 9 Other (specify below) Welded X
 7 Fiberglass Threaded _____
 Blank casing dia: 16 in. to 82 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight _____ lbs./ft. Wall thickness or gauge No 7
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement
 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 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: 16 in. to 123 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 89 ft. to 123 ft., From _____ ft. to _____ ft. to _____ ft. to _____ ft.
 Gravel Pack Intervals: From 10 ft. to 123 ft., From _____ ft. to _____ ft. to _____ 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. to _____ 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)
 13 Watertight sewer lines
 Direction from well: north How many feet: 3/8 mile? Water Well Disinfected? Yes HTH No
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____ If yes, date sample was submitted: _____ month _____ day _____ year
 Pump Installed? Yes X No _____
 If Yes: Pump Manufacturer's name: Western Sand Roller Model No. 4-12C.M HP 60 Volts
 Depth of Pump Intake: 100 ft. Pumps Capacity rated at: 750 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 _____ month _____ day _____ 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 _____ month _____ day _____ year under the business name of Russner Antz - Bernis by (signature) Trudie Rodson

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	top soil			
2	29	clay			
29	53	sand + gravel			
53	82	clay			
82	123	sand + gravel			
123	129	clay			
129	173	sand + gravel			
173	202	sand + gravel w/clay			
202	204	Red Sand			

ELEVATION: explained

Depth(s) Groundwater Encountered 1. 14 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.