

1 LOCATION OF WATER WELL: Fraction NE 1/4 NW 1/4 SE 1/4 Section Number 16 Township Number T 26 S Range Number R 2 W 2
 County: Edgworth Distance and direction from nearest town or city street address or well if located within city? 125 Cedar Ct. Colwich KS

2 WATER WELL OWNER: Linus Schumaker
 RR#, St. Address, Box #: 250 No Colorado
 City, State, ZIP Code: Colwich KS 67020 Board of Agriculture, Division of Water Resources
 Application Number: _____

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

 4 DEPTH OF COMPLETED WELL: 62 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 28 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 28 ft. below land surface measured on mo/day/yr 11-14-89
 Pump test data: Well water was 28 ft. after _____ hours pumping 20 gpm
 Est. Yield 50 gpm Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter 11 in. to 62 ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
☒ 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 Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes X No _____

5 TYPE OF BLANK CASING USED:
 1 Steel ☒ 3 RMP (SR) ☐ 5 Wrought iron ☐ 8 Concrete tile ☐ CASING JOINTS: Glued X Clamped _____
 2 PVC ☐ 4 ABS ☐ 6 Asbestos-Cement ☐ 9 Other (specify below) _____ Welded _____
 7 Fiberglass _____ Threaded _____
 Blank casing diameter 5 in. to 50 ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.
 Casing height above land surface 12 in., weight 1.59 lbs./ft. Wall thickness or gauge No. SDR26
 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 ☐ 11 Other (specify) _____
 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-PERFORATED INTERVALS: From 50 ft. to 62 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 23 ft. to 62 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement ☐ 2 Cement grout ☒ 3 Bentonite ☐ 4 Other _____
 Grout Intervals: From 3 ft. to 23 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? West How many feet? 25

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Top so.			
2	21	Clay			
21	34	fine sand			
34	35	Clay			
35	62	fine to med sand			

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) 11-14-89 and this record is true to the best of my knowledge and belief. Kansas
 Water Well Contractor's License No. 318 This Water Well Record was completed on (mo/day/yr) 12-20-89
 under the business name of Weninger Duller by (signature) [Signature]

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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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E/W

SEC.

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