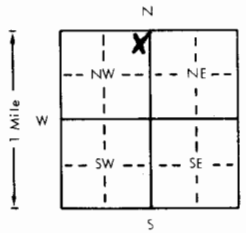


1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: reno		NE 1/4 NE 1/4 NW 1/4	6	T 26 S	R 6 E (W)		
Distance and direction from nearest town or city? 3 mi. N of Pretty Prairie			Street address of well if located within city?				
2 WATER WELL OWNER: Edward White Jr.							
RR#, St. Address, Box # : RD 1			Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : Pretty Prairie, KS 67570			Application Number:				
3 DEPTH OF COMPLETED WELL: 60 ft. Bore Hole Diameter: 10 in. to 64 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: 28 ft. below land surface measured on 7 month 9 day 80 year							
Pump Test Data: Well water was 30 ft. after 2 hours pumping 20 gpm							
Est. Yield 40 gpm: Well water was . . . 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 X Clamped . . .							
2 PVC 4 ABS 7 Fiberglass 9 Other (specify below) Welded . . .							
3 Threaded . . .							
Blank casing dia 6 in. to 40 ft. Dia . . . in. to . . . ft. Dia . . . in. to . . . ft.							
Casing height above land surface: 12 in., weight 3.35 lbs./ft. Wall thickness or gauge No 160 psi							
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 7 Torch cut 10 Other (specify) . . .							
Screen-Perforation Dia: 6 in. to 60 ft. Dia . . . in. to . . . ft. Dia . . . in. to . . . ft.							
Screen-Perforated Intervals: From 40 ft. to 60 ft., From . . . ft. to . . . ft.							
From . . . ft. to . . . ft., From . . . ft. to . . . ft.							
Gravel Pack Intervals: From 35 ft. to 64 ft., From . . . ft. to . . . ft.							
From . . . ft. to . . . ft., From . . . ft. to . . . ft.							
5 GROUT MATERIAL:							
1 Neat cement 2 Cement grout 3 Bentonite 4 Other . . .							
Grouted Intervals: From 3 ft. to 15 ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.							
What is the nearest source of possible contamination:							
1 Septic tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 14 Abandoned water well							
2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 15 Oil well/Gas well							
3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines 16 Other (specify below)							
Direction from well: SE How many feet: 100 ? Water Well Disinfected? Yes X No							
Was a chemical/bacteriological sample submitted to Department? Yes . . . No X If yes, date sample was submitted . . . month . . . day . . . year: Pump Installed? Yes X No							
If Yes: Pump Manufacturer's name: Valley Model No. 51208 HP 1/2 Volts 230							
Depth of Pump Intake: 45 ft. Pumps Capacity rated at 12 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 7 month 9 day 80 year							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 382							
This Water Well Record was completed on 1 month 29 day 81 year under the business name of Miller Water Well Service by (signature) Eva Miller							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	3	Gr Clay			
		3	18	Br Clay			
		18	62	F+C Sand			
		62	64	Red Shale			
ELEVATION:							
Depth(s) Groundwater Encountered 1. . . 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.							