WATER SERECOSE FORM LOCATION OF WATER WELL: Fraction 1/4 SE 1/4 SE 1/4 Township Number Section Number Range Number 27 S Distance and direction from nearest town or city street address of well if located within city? 2 WATER WELL OWNER: T: Nace RR#, St. Address, Box # Board of Agriculture, Division of Water Resources AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL .... ft. below land surface measured on mo/day/yr ...... ft. below land surface measured on mo/day/yr ..... WELL WATER TO BE USED AS: 8 Air conditioning 5 Public water supply 11 Injection well Domestic 2 Irrigation 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well ...... Was a chemical/bacteriological sample submitted to Department? Yes ....... No .......; If yes, mo/day/yrs sample was sub-Water Well Disinfected? Yes CASING JOINTS: Glued ........... Clamped ...... TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile Welded ..... Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 7 Fiberglass Threaded ..... ..... Blank casing diameter 5. in. to 7.4 ft., Dia in. to ft., Dia in. to ft., Dia in. to ft. Wall thickness or guage No. **O** PVC TYPE OF SCREEN OR PERFORATION MATERIAL: 10 Asbestos-Cement 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 11 Other (Specify) ..... 1 Steel 4 Galvanized Steel 6 Concrete tile 9 ABS 12 None used (open hole) 2 Brass SCREEN OR PERFORATION OPENINGS ARE: 5 Guazed wrapped 8 Saw cut 11 None (open hole) 9 Drilled holes Mill slot 4 Key punched 6 Wire wrapped 1 Continuous slot 7 Torch cut 10 Other (specify) ......ft. 2 Louvered shutter SCREEN-PERFORATED INTERVALS: GRAVEL PACK INTERVALS: From ...... ft. to ..... ft., From ..... ft. to ..... ft. **B**Bentonite **GROUT MATERIAL:** 1 Neat cement 2 Cement grout What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well 15 Oil well/Gas well 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 13 Insecticide storage 9 Feedyard Direction from well? How many feet? **FROM** LITHOLOGIC LOG FROM PLUGGING INTERVALS TO TO 0 30 38 30 βz 110 110 //Y CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 👩 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was 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 cipies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your

records. Fee of \$5.00 for each constructed well.