

1 LOCATION OF WATER WELL
County: Sg Fraction: SW 1/4 NE 1/4 NE 1/4 Section Number: 36 Township Number: T 27 S Range Number: R 4 E(W)
Distance and direction from nearest town or city? _____ Street address of well if located within city? 1721 Eileen, Garden Plain

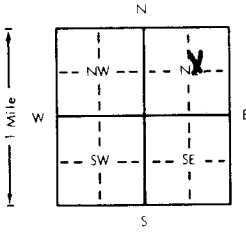
2 WATER WELL OWNER: Emanuel Ost
RR#, St. Address, Box #: 15813 W. Pawnee Board of Agriculture, Division of Water Resources
City, State, ZIP Code: Goddard, KS 67052 Application Number: _____

3 DEPTH OF COMPLETED WELL: 80 ft. Bore Hole Diameter: 11 in. to _____ ft., and _____ in. to _____ ft.
Well Water to be used as:
☒ Domestic ☐ Feedlot ☐ Public water supply ☐ Air conditioning ☐ Injection well
☐ Irrigation ☐ Industrial ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below)
☐ Lawn and garden only ☐ Observation well
Well's static water level: 32 ft. below land surface measured on _____ month 20 day 80 year
Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
Est. Yield: 20/25 gpm: Well water was 38 ft. after 1/2 hours pumping 15 gpm

4 TYPE OF BLANK CASING USED:
☐ Steel ☒ RMP (SR) ☐ Wrought iron ☐ Concrete tile ☐ Casing Joints: ☒ Glued ☐ Clamped
☐ PVC ☐ ABS ☐ Asbestos-Cement ☐ Other (specify below) ☐ Welded
☐ Blank casing dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
Casing height above land surface: 12 in., weight 150 lbs./ft. Wall thickness or gauge No. 300
TYPE OF SCREEN OR PERFORATION MATERIAL:
☐ Steel ☐ Stainless steel ☐ Fiberglass ☒ RMP (SR) ☐ Asbestos-cement
☐ Brass ☐ Galvanized steel ☐ Concrete tile ☐ ABS ☐ None used (open hole)
Screen or Perforation Openings Are:
☐ Continuous slot ☒ Mill slot ☐ Gauzed wrapped ☐ Saw cut ☐ None (open hole)
☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☐ Drilled holes
☐ Torch cut ☐ Other (specify) _____
Screen-Perforation Dia: 1/2 in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
Screen-Perforated Intervals: From 30 ft. to 80 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
Gravel Pack Intervals: From 18 ft. to 80 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

5 GROUT MATERIAL: ☐ Neat cement ☒ Cement grout ☐ Bentonite ☐ Other
Grouted Intervals: From 3 ft. to 13 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
What is the nearest source of possible contamination:
☒ Septic tank ☐ Cess pool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well
☐ Sewer lines ☐ Seepage pit ☐ Feed yard ☐ Fertilizer storage ☐ Oil well/Gas well
☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below)
☐ Watertight sewer lines
Direction from well: SW How many feet: 75 ? Water Well Disinfected? ☒ Yes ☐ 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: Pioneer Model No. A12120 HP 1/2 Volts 220
Depth of Pump Intake: 50 ft. Pumps Capacity rated at 12 gal./min.
Type of pump: ☒ Submersible ☐ Turbine ☐ Jet ☐ Centrifugal ☐ Reciprocating ☐ Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on _____ month 20 day 80 year 3/8
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____
This Water Well Record was completed on _____ month 23 day 80 year, under the business name of Wmzyr Daily by (signature) [Signature]

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

FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG
0 2 Top Soil _____ _____
2 18 Red Clay _____ _____
18 26 Med Sand _____ _____
26 80 Red + Blue-gr Shale _____ _____
ELEVATION: _____