

1 LOCATION OF WATER WELL
 County: kiowa Fraction SE 1/4 SW 1/4 SE 1/4 Section Number 30 Township Number T 29 S Range Number R 18 E (W)

Distance and direction from nearest town or city? 1/2 W 8 S of GREENSBURG KS Street address of well if located within city?

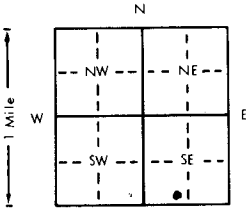
2 WATER WELL OWNER: Mennonite Church, Bethel Board of Agriculture, Division of Water Resources
 RR#, St. Address, Box #: GREENSBURG KANSAS Application Number:

3 DEPTH OF COMPLETED WELL: 280 ft. Bore Hole Diameter: 8 3/4 in. to 280 ft. and _____ in. to _____ ft.
 Well Water to be used as:
 5 Public water supply 8 Air conditioning 11 Injection well
 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 Observation well
 Well's static water level: 46 ft. below land surface measured on aug. month 18 day 1980 year
 Pump Test Data: Well water was 140 ft. after 3 hours pumping. 15 gpm
 Est. Yield 15 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 Clamped
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded
 Blank casing dia 5 in. to 60 ft., Dia 5 in. to 70-90 ft., Dia 5"-120-180 190-270 ft.
 Casing height above land surface: 16 in., weight 1.75 lbs./ft. Wall thickness or gauge No _____
 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-Perforation Dia: 5 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 60 ft. to 70 ft., From 730 ft. to 780 ft., From 780 ft. to 790 ft.
 From 90 ft. to 120 ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 45 ft. to 280 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 4 ft. to 16 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 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: NW How many feet: 51 ? 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 No
 If Yes: Pump Manufacturer's name: Flint & Walling Model No. ZBA12 HP 3/4 Volts 230
 Depth of Pump Intake: 192 ft. Pumps Capacity rated at 10 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 8 month 18 day 1980 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 224
 This Water Well Record was completed on 9 month 7 day 1980 year under the business name of Carl Hayse Water Well Serv by (signature) Carl Hayse

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


FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Top Soil			
2	34	Tan Clay + Gyp			
34	38	Sand + Gravel			
38	80	Tan Clay + Gyp			
80	106	Tan Clay with streaks of Brown Rock			
106	112	Gray Clay with Br Rock			
112	300	Shale with 3" to 6" streaks of white Rock. We believe the water comes from these Also the Br Rock.			

ELEVATION:
 Depth(s) Groundwater Encountered 1. 46 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.

OFFICE USE ONLY T 29 R 18 E (W) SEC 70 SW 1/4 SE 1/4