

1 LOCATION OF WATER WELL  
 County: Rowa Fraction SW 1/4 NW 1/4 NW 1/4 Section Number 8 Township Number T 29 S Range Number R 18 EW

Distance and direction from nearest town or city? 1/2 W 4 S Greensburg  
 Street address of well if located within city?

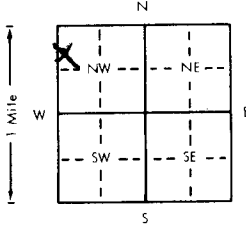
2 WATER WELL OWNER: Albert Rose  
 RR#, St. Address, Box #: Greensburg Kansas  
 City, State, ZIP Code: Greensburg Kansas  
 Board of Agriculture, Division of Water Resources  
 Application Number:

3 DEPTH OF COMPLETED WELL: 190 ft. Bore Hole Diameter: 8 3/4 in. to . . . ft., and . . . in. to . . . ft.  
 Well Water to be used as:  
 Domestic    3 Feedlot    6 Oil field water supply    9 Dewatering    11 Injection well  
 2 Irrigation    4 Industrial    7 Lawn and garden only    10 Observation well    12 Other (Specify below)  
 Well's static water level: 134 ft. below land surface measured on 8 month 30 day 80 year  
 Pump Test Data: Well water was 140 ft. after 1 hours pumping 10 gpm  
 Est. Yield 15 gpm: Well water was . . . ft. after . . . hours pumping . . . gpm

4 TYPE OF BLANK CASING USED:  
 1 Steel     3 RMP (SR)    6 Asbestos-Cement    9 Other (specify below)    Casing Joints: Glued  Clamped . . .  
 2 PVC     4 ABS    7 Fiberglass    . . .    Welded . . .  
 Blank casing dia: 5 1/4 in. to 170 ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.  
 Casing height above land surface: 14 in., weight 1.75 lbs./ft. Wall thickness or gauge No. SDR-26  
 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) . . .  
 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 170 ft. to 190 ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.  
 Gravel Pack Intervals: From 155 ft. to 190 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 14 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: W. How many feet: 100 ? 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. 10BA15 HP 1 Volts 230  
 Depth of Pump Intake: 172 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  constructed, (2) reconstructed or (3) plugged under my jurisdiction and was completed on 8 month 30 day 80 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 11 month 5 day 80 year under the business name of Carl Kayse Water Well Service by (signature) Carl Kayse

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Top Soil			
3	14	Tan Clay + Gyp			
14	95	Tan Clay			
95	152	Dry Gravel			
152	159	Tan Clay			
159	190	GRAVEL			

 ELEVATION:  
 Depth(s) Groundwater Encountered 1. 134 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  
R  
EW  
SEC  
SW 1/4 NW 1/4 NW 1/4