

1 LOCATION OF WATER WELL
 County: Norton Fraction SE 1/4 SE 1/4 SE 1/4 Section Number 34 Township Number T 2 S Range Number R 23 E/W

Distance and direction from nearest town or city? 120 South Brown St Street address of well if located within city? 120 S Brown St Norton Kansas

2 WATER WELL OWNER: LeRoy Le Beau
 RR#, St. Address, Box #: 120 S Brown Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Norton Kansas 67654 Application Number:

3 DEPTH OF COMPLETED WELL: 42 1/2 ft. Bore Hole Diameter: 9 in. to 42 1/2 ft. and _____ in. to _____ ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 6 Oil field water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 7 Lawn and garden 9 Dewatering 12 Other (Specify below)
Fishing Gate Shop
 Well's static water level: 33 1/2 ft. below land surface measured on _____ month 22 day 82 year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 24 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) Welded _____
 2 PVC 4 ABS 7 Fiberglass _____ Threaded _____
 Blank casing dia: 5 in. to 32 1/2 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight 1236 lbs./ft. Wall thickness or gauge No. 214 SDR 26

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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 42 1/2 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 32 1/2 ft. to 42 1/2 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 14 ft. to 42 1/2 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

5 GROUT MATERIAL: 1 Heat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grouted Intervals: From 6 ft. to 14 ft. From _____ ft. to _____ 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 _____ How many feet _____ ? 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: Aeromotor Model No. 50 CD HP 1/2 Volts 230
 Depth of Pump Intake: 40 ft. Pumps Capacity rated at 6 g.p.m. 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 July month 22 day 1982 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 167
 This Water Well Record was completed on July month 2 day 1982 year under the business name of Fawcett Drilling by (signature) John R. Fawcett

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	30	Clay		
	30	41	Sand			
	41	42 1/2	Shale			

This well was Not Disinfected Because of Killing the Fish

ELEVATION: upland

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.