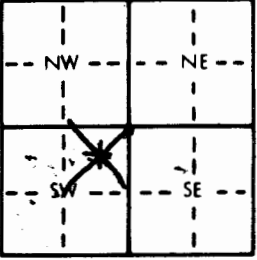


1. LOCATION County: <u>Barber</u>	Fraction: <u>NE SW</u>	Section Number: <u>17</u>	Township Number: <u>30</u>	Range Number: <u>11 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>2 1/2 miles South of Jabel Kansas</u>				
2. WATER WELL OWNER: RR#, St. Address, Box #: City, State, ZIP Code: <u>Route 1 Box 86 Jabel Kansas 67065</u>			Board of Agriculture, Division of Water Resources Application Number:	
3. LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		4. DEPTH OF COMPLETED WELL: <u>60</u> ft. ELEVATION: Depth(s) Groundwater Encountered: 1. _____ ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL: <u>30</u> ft. below land surface measured on mo/day/yr <u>8 28 90</u> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter: <u>12</u> in. to <u>60</u> ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: <div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation </div> <div> 3 Feedlot 4 Industrial </div> <div> 5 Public water supply 6 Oil field water supply 7 Lawn and garden only </div> <div> 8 Air conditioning 9 Dewatering 10 Monitoring well </div> <div> 11 Injection well 12 Other (Specify below) <u>Pasture</u> </div> </div> Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>✓</u> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes <u>✓</u> No _____		
5. TYPE OF BLANK CASING USED: <div style="display: flex; justify-content: space-between;"> <div> 1 Steel 2 PVC Blank casing diameter: <u>5</u> in. to <u>40</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Casing height above land surface: <u>2 foot</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>14</u> </div> <div> 3 RMP (SR) 4 ABS TYPE OF SCREEN OR PERFORATION MATERIAL: <div style="display: flex; justify-content: space-between;"> <div> 1 Steel 2 Brass </div> <div> 3 Stainless steel 4 Galvanized steel </div> <div> 5 Fiberglass 6 Concrete tile </div> <div> 8 RMP (SR) 9 ABS </div> <div> 10 Asbestos-cement 11 Other (specify) _____ 12 None used (open hole) </div> </div> </div> </div> <div style="display: flex; justify-content: space-between;"> <div> 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass SCREEN OR PERFORATION OPENINGS ARE: <div style="display: flex; justify-content: space-between;"> <div> 1 Continuous slot 2 Louvered shutter </div> <div> 3 Mill slot 4 Key punched </div> <div> 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut </div> <div> 8 Saw cut 9 Drilled holes 10 Other (specify) _____ </div> <div> 11 None (open hole) </div> </div> </div> </div>				

6. GROUT MATERIAL: <u>1</u> Neat cement <u>2</u> Cement grout <u>3</u> Bentonite <u>4</u> Other _____				
Grout Intervals: From <u>10</u> ft. to <u>10</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.				
What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div> 1 Septic tank 2 Sewer lines 3 Watertight sewer lines </div> <div> 4 Lateral lines 5 Cess pool 6 Seepage pit </div> <div> 7 Pit privy 8 Sewage lagoon 9 Feedyard </div> <div> 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage </div> <div> 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) <u>NONE (pasture used)</u> </div> </div>				
Direction from well? _____ How many feet? _____				

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Top Soil			
1	10	Soft clay			
10	20	Clay Bricks			
20	30	Sand Gravel			
30	40	Clay Tan Soil			
40	50	Soft coarse			
50	60	Coarse Gravel			
Total Depth <u>60 feet clay Bottom</u>					

7. CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>8-28-90</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>226</u> This Water Well Record was completed on (mo/day/yr) _____ under the business name of <u>Water Well Service</u> by (signature) <u>Ron Allen</u>	
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