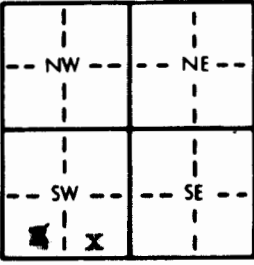


1 LOCATION OF WATER WELL: County: Barber		Fraction SW $\frac{1}{4}$ SE $\frac{1}{4}$ SW $\frac{1}{4}$		Section Number 26	Township Number T 30 S	Range Number R 11 E/W
Distance and direction from nearest town or city street address of well if located within city? 4 E 5 south of Isabel						
2 WATER WELL OWNER: Harold Mease RR#, St. Address, Box #: Nashville, Ks. 67112 City, State, ZIP Code: _____ Board of Agriculture, Division of Water Resources Application Number: _____						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;">  </div>		4 DEPTH OF COMPLETED WELL: 92 ft. ELEVATION: _____ Depth(s) Groundwater Encountered 1. 38 ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL 7 ft. below land surface measured on mo/day/yr 7-18-91 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield 15 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter 9 in. to 92 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 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No _____				
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: <u>Glued</u> Clamped 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded Blank casing diameter 5 in. to 86 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface 17 in., weight _____ lbs./ft. Wall thickness or gauge No. .210 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement 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: 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____ SCREEN-PERFORATED INTERVALS: From 86 ft. to 92 ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 23 ft. to 92 ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
6 GROUT MATERIAL: 1 <u>Neat cement</u> 2 Cement grout 3 Bentonite 4 Other _____ Grout Intervals: From 3 ft. to 23 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well 1 <u>Septic tank</u> 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 200 Direction from well? SE How many feet? _____						
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
0	4	soil				
4	11	dirty sand				
11	38	sand				
38	43	clay				
43	68	fine sand & silt				
68	82	sand & clay				
82	90	clean sand				
90	92	shale				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 7-18-91 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 140 This Water Well Record was completed on (mo/day/yr) 8-1-91 under the business name of Lyman Inc. by (signature) <i>Dean Lyman</i>						
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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.						