

1 LOCATION OF WATER WELL: County: Morton		Fraction: NW 1/4 SW 1/4 SW 1/4		Section Number: 32		Township Number: 31S		Range Number: 40W	
Distance and direction from nearest town or city street address of well if located within city? Rolla, MO North on Highway #51 4 West - 3 North on County Road, 1 Mile East, North into location									
2 WATER WELL OWNER:		Donald L. Ellis				Beredco, Inc.			
RR#, St. Address, Box #:		Richfield, Kansas 67953				Board of Agriculture, Division of Water Resources			
City, State, ZIP Code:						Application Number: T87-351			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 375 ft. ELEVATION:							
		Depth(s) Groundwater Encountered 1 172 ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL 172 ft. below land surface measured on mo/day/yr 9-12-87 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield 60 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter 9" in. to 375 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 <u>Oil field water supply</u> 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well Was a chemical/bacteriological sample submitted to Department? Yes _____ No X ; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes X No _____							
		5 TYPE OF BLANK CASING USED:							
		1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____ 2 <u>PVC</u> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____ Blank casing diameter 5.563 in. to 160 ft. Dia. _____ in. to _____ ft. Dia. _____ in. to _____ ft. Casing height above land surface 28 in., weight 2.93 lbs./ft. Wall thickness or gauge No. 265							
		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 6 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-PERFORATED INTERVALS:							
		GRAVEL PACK INTERVALS:							
		6 GROUT MATERIAL:							
		Grout Intervals: From 0 ft. to 20 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 <u>Oil well/Gas well</u> 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) 13 Insecticide storage Direction from well? Southeast of water well How many feet? 220'							
FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG							
0 2 surface									
2 73 sandy clay									
73 84 clay									
84 103 clay & fine sand									
103 136 clay, gold sandstone									
136 148 black shale									
148 158 gray clay									
158 172 red sandstone									
172 203 white, gold and red sandstone									
203 372 20% clay, 80% gold, white sandstone									
372 375 red bed									
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) Sept. 12, 1987 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 118 This Water Well Record was completed on (mo/day/yr) Sept. 14, 1987 under the business name of Carlile Water Well Service, Inc. by (signature) _____									
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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.									