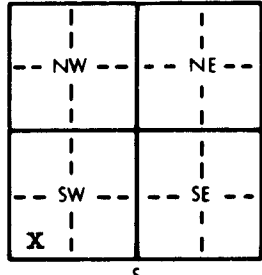


1 LOCATION OF WATER WELL: County: **Barber** Fraction: **SE** $\frac{1}{4}$ **SW** $\frac{1}{4}$ **EW** $\frac{1}{4}$ Section Number: **18** Township Number: **T 32 S** Range Number: **R 10 E 10**

Distance and direction from nearest town or city street address of well if located within city?
1 1/2 West Sharon

2 WATER WELL OWNER: **Helen scripsick**
 RR#, St. Address, Box #: **Sharon, Kansas 67138**
 City, State, ZIP Code: _____
 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: **52** ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. **22** ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL **12** ft. below land surface measured on mo/day/yr **4-12-90**
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield **10** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter **9** in. to **52** 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: Clued _____ Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass _____ Threaded _____
 Blank casing diameter **5** in. to **34** ft., Dia. **5** from **42** to **52** ft., Dia. _____ in. to _____ ft.
 Casing height above land surface **20** in., weight _____ lbs./ft. Wall thickness or gauge No. **215**
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____
 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-PERFORATED INTERVALS: From **34** ft. to **42** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **20** ft. to **52** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 20 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From **3** 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 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
 13 Insecticide storage _____
 Direction from well? **SE** How many feet? **70**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	sandy soil			
2	22	clay			
22	42	med sand			
42	52	fine sand & silt			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **4-16-90** 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) **5-4-90** under the business name of **Lyman inc.** by (signature) *Dean Lyman*

OFFICE USE ONLY
T
R
EW
SEC.
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1/4