

1 LOCATION OF WATER WELL Fraction SW 1/4 NE 1/4 NE 1/4 Section Number 8 Township Number T 32 S Range Number R 16 EW  
 County: Comanche Distance and direction from nearest town or city? 3 1/2 miles Wilmore Street address of well if located within city?

2 WATER WELL OWNER: ~~XXXXXXXXXX~~ TONY UHL  
 RR#, St. Address, Box #: WILMORE KANSAS 67155 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: WILMORE KANSAS 67155 Application Number:

3 DEPTH OF COMPLETED WELL 31 ft. Bore Hole Diameter 8 in. to 31 ft. and \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Well Water to be used as:  
 1 Domestic  2 Irrigation  3 Feedlot  4 Industrial  5 Public water supply  6 Oil field water supply  7 Lawn and garden only  8 Air conditioning  9 Dewatering  10 Observation well  11 Injection well  12 Other (Specify below)  
 Well's static water level 14 ft. below land surface measured on X 10 month X 11 day X 79 year  
 Pump Test Data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Est. Yield 5 gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

4 TYPE OF BLANK CASING USED:  
 1 Steel  2 PVC  3 RMP (SR)  4 ABS  5 Wrought iron  6 Asbestos-Cement  7 Fiberglass  8 Concrete tile  9 Other (specify below)  10 Observation well  
 Blank casing dia 5 in. to 35 ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface \_\_\_\_\_ in., weight 3 lbs./ft. Wall thickness or gauge No 265

TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel  2 Brass  3 Stainless steel  4 Galvanized steel  5 Fiberglass  6 Concrete tile  7 RMP (SR)  8 ABS  9 Other (specify)  10 Asbestos-cement  11 Other (specify)  12 None used (open hole)  
 Screen or Perforation Openings Are:  
 1 Continuous slot  2 Mill slot  3 Louvered shutter  4 Key punched  5 Gauzed wrapped  6 Wire wrapped  7 Torch cut  8 Saw cut  9 Drilled holes  10 Other (specify)  11 None (open hole)  
 Screen-Perforation Dia 5 in. to 5 ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Screen-Perforated Intervals: From 25 ft. to 35 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 Gravel Pack Intervals: From 15 ft. to 35 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

5 GROUT MATERIAL:  1 Neat cement  2 Cement grout  3 Bentonite  4 Other  
 Grouted Intervals: From 3 ft. to 15 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank  2 Sewer lines  3 Lateral lines  4 Cess pool  5 Seepage pit  6 Pit privy  7 Sewage lagoon  8 Feed yard  9 Livestock pens  10 Fuel storage  11 Fertilizer storage  12 Insecticide storage  13 Watertight sewer lines  14 Abandoned water well  15 Oil well/Gas well  16 Other (specify below) Open Pasture  
 Direction from well \_\_\_\_\_ How many feet \_\_\_\_\_ ? Water Well Disinfected? Yes X No \_\_\_\_\_  
 Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No X If yes, date sample was submitted \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year: Pump Installed? Yes \_\_\_\_\_ No X  
 If Yes: Pump Manufacturer's name \_\_\_\_\_ Model No. \_\_\_\_\_ HP \_\_\_\_\_ Volts \_\_\_\_\_  
 Depth of Pump Intake \_\_\_\_\_ ft. Pumps Capacity rated at \_\_\_\_\_ 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 Oct month 11 day 79 year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 140A79  
 This Water Well Record was completed on Oct month 30 day 79 year under the business name of Lyman Bros by (signature) Richard Lyman

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	12	sandy soil			
	12	17	clay			
	17	20	clay calciche			
	20	31	sand hard packed			
	31	32	clay			
	32	35	shale			

ELEVATION: \_\_\_\_\_  
 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.

OFFICE USE ONLY  
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R  
SEC.  
S W 1/4 NE 1/4 NE 1/4