1 LOCATION OF WATER WELL: Township Number Range Number Section Number County: Merale EM) Distance and direction from nearest town or city street address of well if located within city? + 2 W from Mevole 2 WATER WELL OWNER: Time Ross RR#, St. Address, Box # Board of Agriculture, Division of Water Resources Depth(s) Groundwater Encountered 1.....ft. 2..... ft. 3...... AN "X" IN SECTION BOX: Pump test data: Well water was ... & .Q. ft. after hours pumping ... \$\mathcal{Z} \mathcal{Q} gpm - NE --∯ w WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well **O**Domestic 6 Oil field water supply 9 Dewatering 3 Feedlot 12 Other (Specify below) 2 Irrigation 4 Industrial Was a chemical/bacteriological sample submitted to Department? Yes. No. ; If yes, mo/day/yrs sample was sub-Water Well Disinfected? Yes mitted 5 Wrought iron 5 TYPE OF BLANK CASING USED: 8 Concrete tile Clamped. Clamped. 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 1 Steel 2)PVC 4 ABS 7 Fiberglass Threaded...... Blank casing diameter ... in. to ... 2.0 ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft. Gasing height above land surface ... in., weight ... in., weight ... lbs./ft. Wall thickness or gauge No. ... 200 (EPVC TYPE OF SCREEN OR PERFORATION MATERIAL: 10 Asbestos-cement 5 Fiberglass 8 RMP (SR) 1 Steel 3 Stainless steel 9 ABS 2 Brass 4 Galvanized steel 6 Concrete tile 12 None used (open hole) 11 None (open hole) SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut Mill slot 4 Key punched 9 Drilled holes 6 Wire wrapped 1 Continuous slot 7 Torch cut 2 Louvered shutter ft. to 250 ... ft., From ft. to ft. GRAVEL PACK INTERVALS: From. 6 GROUT MATERIAL: 10 Livestock pens 14 Abandoned water well What is the nearest source of possible contamination: Septic tank 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 4 Lateral lines 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 9 Feedvard 13 Insecticide storage 3 Watertight sewer lines 6 Seepage pit How many feet? /60 Direction from well? 5 FROM LITHOLOGIC LOG FROM PLUGGING INTERVALS TO **6** € منتاع OB 125 blue clay 130 130 155 160 16 C 170 170 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was no constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was under the business name of 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 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.