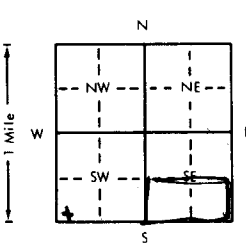


1 LOCATION OF WATER WELL		Fraction	Section Number		Township Number	Range Number
County: <u>Morton</u>		<u>SW 1/4 SW 1/4 SW 1/4</u>	<u>4</u>		<u>T 32 S</u>	<u>R 40 EW</u>
Distance and direction from nearest town or city? <u>OK?</u> <u>Rolla, Kansas 6E 3N Richfield, Kansas 67953</u>			Street address of well if located within city?			
2 WATER WELL OWNER: <u>Idea Snyder</u>			Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box #: <u>N. Star Rt.</u>			Application Number:			
City, State, ZIP Code: <u>Rolla, Kansas 67954</u>						
3 DEPTH OF COMPLETED WELL: <u>205</u> ft. Bore Hole Diameter: . . . in. to . . . 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 XX 12 Other (Specify below)						
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well <u>Stock Windmill</u>						
Well's static water level: <u>X 125</u> ft. below land surface measured on . . . month . . . day . . . year						
Pump Test Data: Well water was . . . ft. after . . . hours pumping . . . gpm						
Est. Yield gpm: Well water was . . . ft. after . . . hours pumping . . . gpm						
4 TYPE OF BLANK CASING USED:						
5 Wrought iron 8 Concrete tile Casing Joints: Glued <u>XX</u> Clamped <u>XX</u>						
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded . . .						
XX 2 PVC 4 ABS 7 Fiberglass . . . Threaded . . .						
Blank casing dia: <u>5</u> in. to <u>165</u> ft. Dia: . . . in. to . . . ft. Dia: . . . in. to . . . ft.						
Casing height above land surface: <u>12-24</u> in., weight <u>200PSI</u> lbs./ft. Wall thickness or gauge No. <u>262</u>						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
XX 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 XX 3 Mill slot 6 Wire wrapped 9 Drilled holes						
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) . . .						
Screen-Perforation Dia: <u>5</u> in. to <u>205</u> ft. Dia: . . . in. to . . . ft. Dia: . . . in. to . . . ft.						
Screen-Perforated Intervals: From: <u>165</u> ft. to <u>205</u> ft. From: . . . ft. to . . . ft.						
From: . . . ft. to . . . ft. From: . . . ft. to . . . ft.						
Gravel Pack Intervals: From: <u>105</u> ft. to <u>205</u> ft. From: . . . ft. to . . . ft.						
From: . . . ft. to . . . ft. From: . . . ft. to . . . ft.						
5 GROUT MATERIAL: XX Neat cement 2 Cement grout 3 Bentonite 4 Other . . .						
Grouted Intervals: From: <u>0</u> ft. to <u>10</u> ft. From: . . . ft. to . . . ft. From: . . . ft. to . . . ft.						
What is the nearest source of possible contamination: <u>None</u> <u>OK</u>						
10 Fuel storage 14 Abandoned water well						
1 Septic tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 15 Oil well/Gas well						
2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 16 Other (specify below)						
3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines						
Direction from well . . . How many feet . . . ? Water Well Disinfected? Yes <u>XX</u> No <u>NOT</u>						
Was a chemical/bacteriological sample submitted to Department? Yes . . . No <u>XX</u> If yes, date sample						
was submitted . . . month . . . day . . . year: Pump installed? Yes . . . No <u>XX</u>						
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 XX 6 Other WM						
6 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 . . . <u>7</u> month . . . <u>3</u> day . . . <u>1981</u> year						
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>160</u>						
This Water Well Record was completed on . . . <u>8</u> month . . . <u>13</u> day . . . <u>1981</u> year under the business						
name of <u>JIM SMITH PUMP SERVICE</u> by (signature) <u>Betty Pearce BK</u> <u>Betty Pearce</u>						
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO
		0	30	Top soil		
		30	60	Clay		
		60	100	sand		
		100	105	Clay shell		
		105	205	sandstone		
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.						