WATER WELL RECORD LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number County: Clark 24 E Distance and direction from nearest town or city street address of well if located within city? 2 WATER WELL OWNER: Jim Cox RR#, St. Address, Box # Board of Agriculture, Division of Water Resources Depth(s) Groundwater Encountered ft. 2 ft. 3 ft. WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr ft. 3 ft. – NE – 8 Air conditioning WELL WATER TO BE USED AS: 5 Public water supply 11 Injection well **O** Domestic 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 3 Feedlot 7 Domestic (lawn & garden) 10 Monitoring well ...... 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 TYPE OF BLANK CASING USED: CASING JOINTS: Glued ........... Clamped ...... 5 Wrought iron 8 Concrete tile 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded ..... 1 Steel Threaded ..... 4 ABS 7 Fiberglass ..... **O**PVC TYPE OF SCREEN OR PERFORATION MATERIAL: 10 Asbestos-Cement 8 RMP (SR) 3 Stainless Steel 5 Fiberglass 11 Other (Specify) ..... 1 Steel 4 Galvanized Steel 6 Concrete tile 9 ABS 12 None used (open hole) 2 Brass SCREEN OR PERFORATION OPENINGS ARE: 5 Guazed wrapped 8 Saw cut 11 None (open hole) Mill slot 6 Wire wrapped 9 Drilled holes 1 Continuous slot 10 Other (specify) ......ft. 7 Torch cut 4 Key punched 2 Louvered shutter SCREEN-PERFORATED INTERVALS: **GRAVEL PACK INTERVALS:** Bentonite **GROUT MATERIAL:** 1 Neat cement 2 Cement grout 4 Other..... Grout Intervals: From ....... ft. to \_\_\_\_\_\_ft. to \_\_\_\_\_\_ft. to \_\_\_\_\_\_ft. to \_\_\_\_\_\_ft. What is the nearest source of possible contamination: (4) Abandoned water well 10 Livestock pens 1 Septic tank 4 Lateral lines 7 Pit privy 15 Oil well/Gas well 11 Fuel storage 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage Direction from well? NE How many feet? /OD **FROM** LITHOLOGIC LOG PLUGGING INTERVALS TO **FROM** TO Đ 15 1C-0 SDR-21 ASTM F480-02 15 70 ASTM BZZ41 JPS ZDO PSI@7PF SDR-21 PUC 1120 Hastings, NE N/21/4 01/12/2006 13:16

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No the best of my knowledge and belief. Kansas Water Well Contractor's Licence No the business name of the

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well.