LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number County: Marile R 27 E/NO Distance and direction from pearest town or city street address of well if located within city? WATER WELL OWNER: one-call #6214263 RR#, St. Address, Box # Board of Agriculture, Division of Water Resources - NE -WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well **O**Domestic 6 Oil field water supply 3 Feedlot 9 Dewatering 12 Other (Specify below) 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 CASING JOINTS: Glued Clamped TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded 4 ABS PVC 7 Fiberglass Threaded TYPE OF SCREEN OR PERFORATION MATERIAL: **PVC** 10 Asbestos-Cement 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 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) 6 Wire wrapped 9 Drilled holes Mill slot 1 Continuous slot 7 Torch cut 10 Other (specify)ft. 2 Louvered shutter 4 Key punched SCREEN-PERFORATED INTERVALS: **GRAVEL PACK INTERVALS:** (3) Bentonite 2 Cement grout 6 GROUT MATERIAL: 1 Neat cement 4 Other..... What is the nearest source of possible contamination: (0) Livestock pens 14 Abandoned water well 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 8 Sewage lagoon 12 Fertilizer storage 2 Sewer lines 5 Cess pool 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage Direction from well? How many feet? 2500 LITHOLOGIC LOG FROM FROM TO **PLUGGING INTERVALS** 0 12 18 78 199 tarave CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was

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, 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 constructed well.