

1 LOCATION OF WATER WELL		Fraction	Section Number		Township Number		Range Number	
County: <u>Republic</u>		<u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$	<u>5</u>		<u>T</u> <u>3</u> <u>S</u>		<u>R</u> <u>1</u> <u>W</u> <u>E/W</u>	
Distance and direction from nearest town or city? <u>1 North - 3/4 East of Cuba</u>			Street address of well if located within city?					

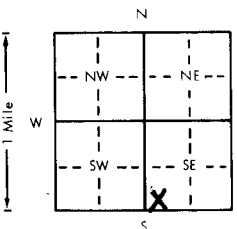
2 WATER WELL OWNER: <u>Raymond Bruns</u>		Board of Agriculture, Division of Water Resources Application Number:
RR#, St. Address, Box #: <u>Route # 1</u>		
City, State, ZIP Code: <u>Marika, Kansas 66960</u>		

3 DEPTH OF COMPLETED WELL: <u>160</u> ft. Bore Hole Diameter: <u>8</u> in. to <u>160</u> ft. and _____ in. to _____ ft.	
Well Water to be used as:	5 Public water supply 8 Air conditioning 11 Injection well <input checked="" type="checkbox"/> 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) <input type="checkbox"/> 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well
Well's static water level: <u>60</u> ft. below land surface measured on <u>April</u> month <u>29</u> day <u>1980</u> year	
Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm	
Est. Yield: <u>15</u> gpm: Well water was <u>150</u> ft. after <u>1/2</u> hours pumping <u>15</u> gpm	

4 TYPE OF BLANK CASING USED:		5 Wrought iron		8 Concrete tile		Casing Joints: Glued <input checked="" type="checkbox"/> Clamped _____	
1 Steel		3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below) _____	
<input checked="" type="checkbox"/> 2 PVC		4 ABS		7 Fiberglass		Welded _____	
Blank casing dia: <u>5</u> in. to <u>140</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.						Threaded _____	
Casing height above land surface: <u>12</u> in., weight <u>3</u> lbs./ft. Wall thickness or gauge No. <u>258</u>							
TYPE OF SCREEN OR PERFORATION MATERIAL:		<input checked="" type="checkbox"/> 7 PVC		10 Asbestos-cement			
1 Steel		3 Stainless steel		5 Fiberglass		8 RMP (SR)	
2 Brass		4 Galvanized steel		6 Concrete tile		9 ABS	
Screen or Perforation Openings Are:		5 Gauzed wrapped		<input checked="" type="checkbox"/> 8 Saw cut		11 None (open hole)	
1 Continuous slot		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 _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.							
Screen-Perforated Intervals: From <u>140</u> ft. to <u>160</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.							
Gravel Pack Intervals: From <u>10</u> ft. to <u>160</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.							

5 GROUT MATERIAL: <input checked="" type="checkbox"/> 1 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:		None		10 Fuel storage		14 Abandoned water well	
1 Septic tank		4 Cess pool		7 Sewage lagoon		11 Fertilizer storage	
2 Sewer lines		5 Seepage pit		8 Feed yard		12 Insecticide storage	
3 Lateral lines		6 Pit privy		9 Livestock pens		13 Watertight sewer lines	
Direction from well _____ How many feet _____ ?		Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, date sample was submitted _____ month _____ day _____ year		Pump Installed? Yes _____ No <input checked="" type="checkbox"/>					
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) <u>constructed</u> , (2) <u>reconstructed</u> , or (3) <u>plugged</u> under my jurisdiction and was completed on <u>April</u> month <u>29</u> day <u>1980</u> year	
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>361</u>	
This Water Well Record was completed on <u>May</u> month <u>17</u> day <u>1980</u> year under the business name of <u>Cox - Beswick Irrigation Service, Inc.</u> by (signature) <u>Francis Cox</u>	

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	35	Top soil & clay			
	35	42	Sandrock			
	42	72	Clay			
	72	122	Sandrock & clay			
	122	160	Sandrock			

ELEVATION: <u>1540 ft</u>	Depth(s) Groundwater Encountered 1. <u>35</u> ft. 2. <u>122</u> ft. 3. _____ ft. 4. _____ ft.	(Use a second sheet if needed)
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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.