

1 LOCATION OF WATER WELL
 County: Republic Fraction NE $\frac{1}{4}$ NE $\frac{1}{4}$ SE $\frac{1}{4}$ Section Number 18 Township Number T 3 S Range Number R 4 W E/W
 Distance and direction from nearest town or city? 1 West - $\frac{1}{2}$ South of Scandia Street address of well if located within city?

2 WATER WELL OWNER: Robert Lervold *replacement well*
 RR#, St. Address, Box #: Route # 1 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Scandia, Kansas 66966 Application Number:

3 DEPTH OF COMPLETED WELL: 43 ft. Bore Hole Diameter: 32 in. to 43 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 12 Other (Specify below)
 X 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well
 Well's static water level: 8 ft. below land surface measured on July month 2 day 1980 year
 Pump Test Data: Well water was 40 ft. after $\frac{1}{2}$ hours pumping 1000 gpm
 Est. Yield 1000 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

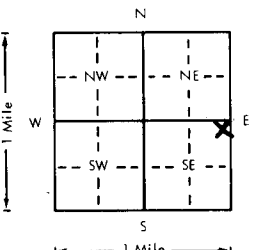
4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) X 6 Asbestos-Cement 9 Other (specify below) Welded _____
 2 PVC 4 ABS 7 Fiberglass _____ Threaded _____
 Blank casing dia 16 in. to 17 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight _____ lbs./ft. Wall thickness ~~XXXXXX~~ 3/4"
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) X 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____
 12 None used (open hole)
 Screen or Perforation Openings Are:
 5 Gauzed wrapped X 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: 16 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 17 ft. to 43 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 10 ft. to 43 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

5 GROUT MATERIAL: 1 Neat cement X 2 Cement grout 3 Bentonite 4 Other _____
 Grouted Intervals: From 0 ft. to 10 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: None
 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)
 13 Watertight sewer lines
 Direction from well _____ How many feet _____ ? Water Well Disinfected? Yes _____ No X
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, date sample was submitted _____ month _____ day _____ year
 Pump Installed? Yes X No _____
 If Yes: Pump Manufacturer's name W L R Model No. 8 B HP 35 Volts _____
 Depth of Pump Intake 38 ft. Pumps Capacity rated at 1000 gal./min.
 Type of pump: 1 Submersible X 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other _____

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on July month 2 day 1980 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 361
 This Water Well Record was completed on July month 31 day 1980 year under the business name of Cox - Beswick Irrigation Service, Inc. by (signature) Francis Cox

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	14	Top soil & clay		
	14	23	Sand & gravel			
	23	42	Gravel			
	42	43	Clay			

ELEVATION: 1431



Depth(s) Groundwater Encountered 1. 14 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.