

1 LOCATION OF WATER WELL Fraction SE 1/4 SE 1/4 SE 1/4 Section Number 31 Township Number T 4 S Range Number R 23 EW
 County: NORTON

Distance and direction from nearest town or city? 3 1/2 mi SE LENORA Street address of well if located within city?

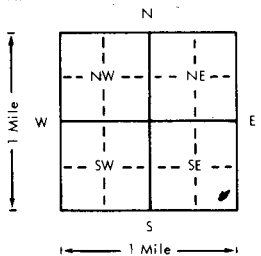
2 WATER WELL OWNER: BOB SMITH
 RR#, St. Address, Box # :
 City, State, ZIP Code LENORA KANSAS Board of Agriculture, Division of Water Resources Application Number:

3 DEPTH OF COMPLETED WELL 89 ft. Bore Hole Diameter 8 in. to 89 ft., and _____ in. to _____ ft.
 Well Water to be used as:
 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 Well's static water level 21 ft. below land surface measured on 4 month 25 day 80 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:
 1 Steel RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued _____ Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing dia 5 in. to 79 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 12 in., weight 5 DR 26 lbs./ft. Wall thickness or gauge No _____
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass RMP (SR) 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:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) _____
 Screen-Perforation Dia 5 in. to 89 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 79 ft. to 89 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 89 ft. to 20 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

5 GROUT MATERIAL: Neat cement 2 Cement grout 3 Bentonite 4 Other
 Grouted Intervals: From 5 ft. to 20 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 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) NONE
 13 Watertight sewer lines
 Direction from well _____ How many feet _____ ? Water Well Disinfected? Yes No
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____ If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No _____
 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) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 4 month 25 day 81 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 290
 This Water Well Record was completed on 5 month 25 day 81 year under the business name of DARBEI MINIMUM by (signature) Darbei Minimum

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:


FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
<u>0</u>	<u>25</u>	<u>SURFACE CLAY</u>			
<u>25</u>	<u>36</u>	<u>SAND</u>			
<u>36</u>	<u>60</u>	<u>SANDY CLAY</u>			
<u>60</u>	<u>87</u>	<u>SAND & GRAVEL</u>			
<u>87</u>	<u>89</u>	<u>BLUE SHALE</u>			

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.