

#2-

OFFICE USE ONLY

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County X REPUBLIC	X NW 1/4 NE 1/4 SE 1/4	X 28	X T 4 S	X R 4 EW

Distance and direction from nearest town or city? **OF SCANDIA**
X 1 MILE SOUTH 1/4 EAST 7/8 SOUTH 1/4 WEST

Street address of well if located within city?

2 WATER WELL OWNER: **X J.E. BREWER ESTATE**

RR#, St. Address, Box # **X**

City, State, ZIP Code **X**: **ROUTE 2 CONCORDIA KANS. 66901**

Board of Agriculture, Division of Water Resources
 Application Number: **X 30,041**

3 DEPTH OF COMPLETED WELL: **52** ft. Bore Hole Diameter: **30** in. to **52** 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 **10'** ft. below land surface measured on ... month ... day ... year

Pump Test Data: **No Test made** 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:

5 Wrought iron	8 Concrete tile	Casing Joints: Glued ... Clamped X
1 Steel	3 RMP (SR)	Welded ...
X Asbestos-Cement	9 Other (specify below)	Threaded ...
2 PVC	7 Fiberglass	

Blank casing dia **1 7/8** in. to ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft.

Casing height above land surface **ONE foot** in., weight ... lbs./ft. Wall thickness or gauge No. **3/4"**

TYPE OF SCREEN OR PERFORATION MATERIAL:

7 PVC	X Asbestos-cement
1 Steel	3 Stainless steel
5 Fiberglass	8 RMP (SR)
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 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 **1 7/8** in. to ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft.

Screen-Perforated Intervals: **X** From **39** ft. to **52** ft., From ... ft. to ... ft., From ... ft. to ... ft.

Gravel Pack Intervals: From **10** ft. to **52** ft., From ... ft. to ... ft., From ... ft. to ... ft.

5 GROUT MATERIAL:

1 Neat cement	X Cement grout	3 Bentonite	4 Other
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Grouted Intervals: From **1** ft. to **10** ft., From ... ft. to ... ft., From ... ft. to ... ft.

What is the nearest source of possible contamination:

1 Septic tank	X Cess pool	7 Sewage lagoon	11 Fertilizer storage	15 Oil well/Gas well
2 Sewer lines	5 Seepage pit	8 Feed yard	12 Insecticide storage	16 Other (specify below)
3 Lateral lines	6 Pit privy	9 Livestock pens	13 Watertight sewer lines	

Direction from well **South east** How many feet **1500** ? Water Well Disinfected? Yes **X** No

Was a chemical/bacteriological sample submitted to Department? Yes No **X** If yes, date sample was submitted ... month ... day ... year

Pump Installed? Yes No **X**

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 ~~re~~ constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on **APRIL** month **10th** day **1980** year

and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **247**

This Water Well Record was completed on **Aug** month **13** day **1980** year under the business name of **CARL THOMAN & SON** by (signature) **Delmer Thoman**

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	1	8'	Black soil			
	8	20'	Fine sand			
	20	52'	good coarse gravel			

ELEVATION: **1401**

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.