

<b>1 LOCATION OF WATER WELL:</b> County: <b>Rooks</b>	Fraction SW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$	Section Number <b>10</b>	Township Number T 7 S	Range Number R 16 <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">EW</span>																																																																														
Distance and direction from nearest town or city street address of well if located within city? <b>NE of Hwy 24 &amp; Pine Street intersection, Woodston</b>																																																																																		
<b>2 WATER WELL OWNER: Patrick Lingg</b> RR#, St. Address, Box # : <b>PO Box 542</b> City, State, ZIP Code : <b>Stockton, Kansas 67669</b> Board of Agriculture, Division of Water Resources Application Number:																																																																																		
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>  <div style="text-align: center;"> </div>	<b>4 DEPTH OF COMPLETED WELL</b> . . . . . <b>53</b> . . . . . ft ELEVATION: . . . . . Depth(s) Groundwater Encountered 1. . . . . ft 2. . . . . ft 3. . . . . ft WELL'S STATIC WATER LEVEL . . . . . ft. below land surface measured on mo/day/yr Pump test data: Well water was . . . . . <b>NA</b> . . . . . ft. after . . . . . hours pumping . . . . . gpm Est. Yield . . . <b>NA</b> . . . gpm: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm Bore Hole Diameter . . . <b>8</b> . . . in. to . . . . <b>53</b> . . . . . 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) 2 Irrigation 4 Industrial 7 Lawn and garden only <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">10</span> Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes.....No <input checked="" type="checkbox"/> ; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes No <input checked="" type="checkbox"/>																																																																																	
<b>5 TYPE OF BLANK CASING USED:</b> <table style="width:100%; border: none;"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought iron</td> <td>8 Concrete tile</td> <td colspan="2">CASING JOINTS: Glued . . . . . Clamped . . . . .</td> </tr> <tr> <td><span style="border: 1px solid black; border-radius: 50%; padding: 2px;">2</span> PVC</td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>9 Other (specify below)</td> <td colspan="2">Welded . . . . .</td> </tr> <tr> <td></td> <td></td> <td>7 Fiberglass</td> <td></td> <td colspan="2">Threaded. <input checked="" type="checkbox"/></td> </tr> </table> Blank casing diameter . . . . . <b>2</b> . . . . . in. to . . . . . <b>38</b> . . . . . ft, Dia . . . . . in. to . . . . . ft, Dia . . . . . in. to . . . . . ft. Casing height above land surface . . . . . in., weight . . . . . lbs./ft. Wall thickness or gauge No. . . . . <b>Sch. 40</b> <b>TYPE OF SCREEN OR PERFORATION MATERIAL</b> <table style="width:100%; border: none;"> <tr> <td>1 Steel</td> <td>3 Stainless steel</td> <td>5 Fiberglass</td> <td><span style="border: 1px solid black; border-radius: 50%; padding: 2px;">7</span> PVC</td> <td>10 Asbestos-cement</td> </tr> <tr> <td>2 Brass</td> <td>4 Galvanized steel</td> <td>6 Concrete tile</td> <td>8 RMP (SR)</td> <td>11 Other (specify) . . . . .</td> </tr> <tr> <td></td> <td></td> <td></td> <td>9 ABS</td> <td>12 None used (open hole)</td> </tr> </table> <b>SCREEN OR PERFORATION OPENINGS ARE:</b> <table style="width:100%; border: none;"> <tr> <td>1 Continuous slot</td> <td><span style="border: 1px solid black; border-radius: 50%; padding: 2px;">3</span> Mill slot</td> <td>5 Gauzed wrapped</td> <td>8 Saw cut</td> <td>11 None (open hole)</td> </tr> <tr> <td>2 Louvered shutter</td> <td>4 Key punched</td> <td>6 Wire wrapped</td> <td>9 Drilled holes</td> <td></td> </tr> <tr> <td></td> <td></td> <td>7 Torch cut</td> <td>10 Other (specify) . . . . .</td> <td></td> </tr> </table> <b>SCREEN-PERFORATED INTERVALS:</b> From . . . . . <b>38</b> . . . . . ft to . . . . . <b>53</b> . . . . . ft, From . . . . . ft to . . . . . ft From . . . . . ft to . . . . . ft, From . . . . . ft to . . . . . ft <b>GRAVEL PACK INTERVALS:</b> From . . . . . <b>36</b> . . . . . ft to . . . . . <b>53</b> . . . . . ft, From . . . . . ft to . . . . . ft From . . . . . ft to . . . . . ft, From . . . . . ft to . . . . . ft					1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued . . . . . Clamped . . . . .		<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">2</span> PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded . . . . .				7 Fiberglass		Threaded. <input checked="" type="checkbox"/>		1 Steel	3 Stainless steel	5 Fiberglass	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">7</span> PVC	10 Asbestos-cement	2 Brass	4 Galvanized steel	6 Concrete tile	8 RMP (SR)	11 Other (specify) . . . . .				9 ABS	12 None used (open hole)	1 Continuous slot	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">3</span> Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)	2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes				7 Torch cut	10 Other (specify) . . . . .																															
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<b>6 GROUT MATERIAL:</b> 1 Neat cement 2 Cement grout <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">3</span> Bentonite <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">4</span> Other <b>Concrete</b> Grout Intervals: From . . . . . <b>0</b> . . . . . ft to . . . . . <b>1</b> . . . . . ft, From . . . . . <b>1</b> . . . . . ft to . . . . . <b>30</b> . . . . . ft, From . . . . . ft to . . . . . ft What is the nearest source of possible contamination: <table style="width:100%; border: none;"> <tr> <td>1 Septic tank</td> <td>4 Lateral lines</td> <td>7 Pit privy</td> <td>10 Livestock pens</td> <td>14 Abandoned water well</td> </tr> <tr> <td>2 Sewer lines</td> <td>5 Cess pool</td> <td>8 Sewage lagoon</td> <td>11 Fuel storage</td> <td>15 Oil well/Gas well</td> </tr> <tr> <td>3 Watertight sewer lines</td> <td>6 Seepage pit</td> <td>9 Feedyard</td> <td>12 Fertilizer storage</td> <td>16 Other (specify below)</td> </tr> </table> Direction from well? _____ How many feet? _____					1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandoned water well	2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well	3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)																																																															
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<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">1</span> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) . . . . . <b>3/14/2014</b> . . . . . and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . . . . <b>527</b> . . . . . This Water Well Record was completed on (mo/day/yr) . . . . . <b>4/10/14</b> . . . . . under the business name of <b>GeoCore, Inc.</b> by (signature) <i>Dale [Signature]</i>																																																																																		
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, Topeka, Kansas 66620-0001. Telephone: 913-298-5545. Send one to WATER WELL OWNER and retain one for your records.																																																																																		

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