

1 LOCATION OF WATER WELL
 County: **OTTOWA** Fraction **SE 1/4 NW 1/4 SE 1/4** Section Number **16** Township Number **T 9 S** Range Number **R 4 E 10**

Distance and direction from nearest town or city? **SOUTH EDGE DELPHOS**
 Street address of well if located within city?

2 WATER WELL OWNER: **MARION GOLD**
 RR#, St. Address, Box #: **DELPHOS, KANSAS 67436**
 City, State, ZIP Code: **DELPHOS, KANSAS 67436**
 Board of Agriculture, Division of Water Resources
 Application Number:

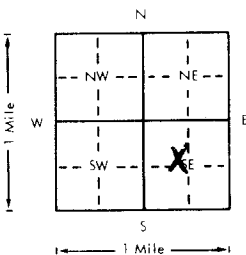
3 DEPTH OF COMPLETED WELL: **40** ft. Bore Hole Diameter: **8** in. to ... ft., and ... in. to ... ft.
 Well Water to be used as:
 Domestic Feedlot Oil field water supply Air conditioning Injection well
 Irrigation Industrial Lawn and garden only Dewatering Other (Specify below)
 Observation well
 Well's static water level: **20** ft. below land surface measured on **8** month **15** day **80** year
 Pump Test Data: Well water was **NA** ft. after ... hours pumping ... gpm
 Est. Yield **70** gpm: Well water was ... ft. after ... hours pumping ... gpm

4 TYPE OF BLANK CASING USED:
 Steel RMP (SR) Asbestos-Cement Concrete tile Other (specify below)
 PVC ABS Fiberglass Welded Threaded
 Blank casing dia: **5 1/2** in. to **20** ft., Dia ... in. to ... ft., Dia ... in. to ... ft.
 Casing height above land surface: **12** in., weight **3** lbs./ft. Wall thickness or gauge No. **2.58**

TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless steel Fiberglass RMP (SR) Asbestos-cement
 Brass Galvanized steel Concrete tile ABS None used (open hole)
 Screen or Perforation Openings Are:
 Continuous slot Mill slot Gauzed wrapped Saw cut None (open hole)
 Louvered shutter Key punched Wire wrapped Drilled holes
 Torch cut Other (specify) ...
 Screen-Perforation Dia: **5** in. to **40** ft., Dia ... in. to ... ft., Dia ... in. to ... ft.
 Screen-Perforated Intervals: From **20** ft. to **40** ft., From ... ft. to ... ft., From ... ft. to ... ft.
 Gravel Pack Intervals: From **10** ft. to **40** ft., From ... ft. to ... ft., From ... ft. to ... ft.

5 GROUT MATERIAL: Neat cement Cement grout Bentonite 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:
 Septic tank Cess pool Sewage lagoon Fuel storage Abandoned water well
 Sewer lines Seepage pit Feed yard Fertilizer storage Oil well/Gas well
 Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)
 Watertight sewer lines
 Direction from well: **NORTH** How many feet: **100** ? 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 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on **8** month **15** day **80** year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **359**
 This Water Well Record was completed on **10** month **7** day **80** year under the business name of **DARYL COX & SONS INC.** by (signature) **Daryl Cox**

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		TO		LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	3	3	13	TOPSOIL		
	3	13	13	25	BROWN CLAY			
	13	25	25	38	BROWN SANDY CLAY			
	25	38	38	40	GRAVEL			
	38	40	40		BLUE CLAY			
	40				STOP			

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.

OFFICE USE ONLY
T
R
4
EW
SEC.
1/8
SE 1/4
NW 1/4
SE 1/4