

135

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: NABAUNSEE	SE 1/4 SE 1/4 SE 1/4	16	T 10 S	R 12 E

Distance and direction from nearest town or city? **1 1/4 mi S. AND 1/2 mi E. of St. Marys**

Street address of well if located within city?

2 WATER WELL OWNER: **DALE HAMMARLUND**

RR#, St. Address, Box #: **RR1**

City, State, ZIP Code: **ST MARYS KANSAS**

Board of Agriculture, Division of Water Resources
Application Number: **34,346**

3 DEPTH OF COMPLETED WELL: **18** ft. Bore Hole Diameter: **32** in. to ft., and in. to ft.

Well Water to be used as:

1 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)
		7 Lawn and garden only	10 Observation well	

Well's static water level: **24** ft. below land surface measured on **10** month **5** day **81** year

Pump Test Data: Well water was **41** ft. after **1** hours pumping **1000** gpm

Est. Yield **1700** gpm: Well water was **49** ft. after **1** hours pumping **1500** gpm

4 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	Casing Joints: <u>Glued</u> <u>Clamped</u>
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded
		7 Fiberglass		Threaded

Blank casing dia: **1 1/2** in. to ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface: **12** in., weight **38** lbs./ft. Wall thickness or gauge No. **75**

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)

Screen or Perforation Openings Are:

1 Continuous slot	3 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)	

Screen-Perforation Dia: **1 1/2** in. to ft., Dia in. to ft., Dia in. to ft.

Screen-Perforated Intervals: From **39** ft. to **78** ft., From ft. to ft., From ft. to ft.

Gravel Pack Intervals: From **10** ft. to **78** ft., From ft. to ft., From ft. to ft.

5 GROUT MATERIAL:

1 Neat cement	2 Cement grout	3 Bentonite	4 Other
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Grouted Intervals: From **0** ft. to **10** 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)
			13 Watertight sewer lines	POT HOLE

Direction from well: **SOUTH** How many feet: **400** ? 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:

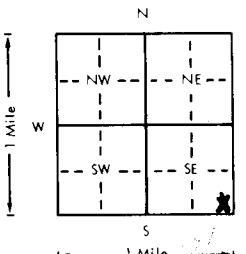
1 Submersible	2 Turbine	3 Jet	4 Centrifugal	5 Reciprocating	6 Other
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6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on **10** month **5** day **1981** year

and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **323**

This Water Well Record was completed on **10** month **14** day **1981** year under the business name of **Hooper Drilling Co.** by (signature) **Dan Hooper**

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		TO		LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	14	14	21	FINE BROWN SANDY SILT	78	
	14	21	21	26	FINE BROWN SAND			
	21	26	26	32	MD-LG GREEN GRAVEL AND GRAY CLAY (10-20%)			
	26	32	32	37	SM GRAY GRAVEL (CLEAR)			
	32	37	37	40	FINE GRAY SAND			
	37	40	40	44	SM-MD GRAY GRAVEL			
	40	44	44	46	MD-LG GRAY GRAVEL			
	44	46	46	78	MD GRAY GRAVEL AND GRAY CLAY (20-30%)			
	46	78	78		MD GRAY GRAVEL (CLEAR)			



ELEVATION: **940** ft.

Depth(s) Groundwater Encountered 1. **24** 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
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12
DW
SEC
16
SE 1/4 SE 1/4 SE 1/4 SE 1/4