

Silverlake

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1 LOCATION OF WATER WELL	Fraction <u>SW</u>	Section Number	Township Number	Range Number
County: <u>SHAWNEE</u>	<u>NE 1/4 NE 1/4 NW 1/4</u>	<u>15</u>	<u>T 11 S</u>	<u>R 14 EW</u>

Distance and direction from nearest town or city? _____ Street address of well if located within city? 521 MARINER

2 WATER WELL OWNER: MR. G. WOOLINGTON
 RR#, St. Address, Box #: 521 MARINER
 City, State, ZIP Code: SILVER LAKE KAN.
 Board of Agriculture, Division of Water Resources
 Application Number: _____

3 DEPTH OF COMPLETED WELL: 45 ft. Bore Hole Diameter: 8 in. to 30 in. to _____ 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)
		<u>7 Lawn and garden only</u>	10 Observation well	

Well's static water level: 28 ft. below land surface measured on _____ month _____ day _____ year

Pump Test Data: Well water was 28 ft. after _____ hours pumping _____ gpm

Est. Yield 30 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:

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

Blank casing dia: 5 in. to _____ in. Dia: 4.5 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.

Casing height above land surface: 18 in., weight _____ lbs./ft. Wall thickness or gauge No. 160

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 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	<u>3 Mill slot</u>	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: 5 in. to _____ ft. Dia: 4.5 in. to _____ ft. Dia: 4.0 in. to _____ ft. Dia _____ in. to _____ ft.

Screen-Perforated Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

Gravel Pack Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grouted Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ 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)
			<u>13 Watertight sewer lines</u>	

Direction from well: NW How many feet: 30 ? 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: BURKS Model No. ASMBBB HP 1/3 Volts 115

Depth of Pump Intake: 42 ft. Pumps Capacity rated at: 10 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 _____ month _____ day _____ year

and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 333

This Water Well Record was completed on _____ month _____ day _____ year under the business name of H.L. PETTIT by (signature) H.L. Pettit

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
1	6	TOP SOIL			
6	14	CLAY BROWN			
14	18	BROWN SILT			
18	26	FINE SAND			
26	30	SAND			
30	45	SAND + GRAVEL			

ELEVATION: 905

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

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SEC.

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NW

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SW

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