

1 LOCATION OF WATER WELL		Fraction		Section Number		Township Number		Range Number	
County <u>Shawnee</u>		<u>SW</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$		<u>16</u>		T <u>11S</u> S		R <u>15E</u> EW	
Distance and direction from nearest town or city? <u>300' E. of Meno-</u> <u>ken Rd. on U. S. 24.</u>				Street address of well if located within city?					

  

2 WATER WELL OWNER: <u>Sam Falley</u>		Board of Agriculture, Division of Water Resources Application Number: <u>32318</u>
RR#, St. Address, Box #: <u>R. R. # 6</u>		
City, State, ZIP Code: <u>Topeka, Kansas 66608</u>		

  

3 DEPTH OF COMPLETED WELL: <u>68</u> ft. Bore Hole Diameter: <u>32</u> in. to <u>68</u> 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: <u>29</u> ft. below land surface measured on _____ month <u>12</u> day <u>29</u> year _____	
Pump Test Data	Well water was: <u>37</u> ft. after <u>1</u> hours pumping: <u>800</u> gpm
Est. Yield <u>1500</u> gpm	Well water was: <u>46</u> ft. after <u>3</u> hours pumping: <u>1000</u> gpm

  

4 TYPE OF BLANK CASING USED:		5 Wrought iron		8 Concrete tile		Casing Joints: Glued _____ Clamped _____	
1 Steel		3 RMP (SR)		6 <u>Asbestos-Cement</u>		9 Other (specify below) _____	
2 PVC		4 ABS		7 Fiberglass		Welded _____	
						Threaded _____	
Blank casing dia. <u>16</u> in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.							
Casing height above land surface: <u>12</u> in., weight <u>38#</u> per ft. _____ lbs. ft. Wall thickness or gauge No. <u>.75</u>							
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC		10 <u>Asbestos-cement</u>			
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		8 <u>Saw cut</u>		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. <u>16</u> in. to <u>68</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.							
Screen-Perforated Intervals: 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.							

  

5 GROUT MATERIAL:		1 Neat cement		2 <u>Cement grout</u>		3 Bentonite		4 Other _____	
Grouted Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.									
What is the nearest source of possible contamination:		1 <u>Septic tank</u>		4 Cess pool		7 Sewage lagoon		10 Fuel storage	
		2 Sewer lines		5 Seepage pit		8 Feed yard		11 Fertilizer storage	
		3 Lateral lines		6 Pit privy		9 Livestock pens		12 Insecticide storage	
								13 Watertight sewer lines	
								14 Abandoned water well	
								15 Oil well/Gas well	
								16 Other (specify below) _____	
Direction from well: <u>NW</u> How many feet: <u>150</u> ? Water Well Disinfected? Yes _____ No <u>X</u>									
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, date sample was submitted _____ month _____ day _____ year									
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: <u>X</u> This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on <u>9</u> month <u>15</u> day <u>79</u> year _____	
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>323</u>	
This Water Well Record was completed on _____ month <u>15</u> day _____ year _____	
name of <u>Hoobler Drilling Co.</u> by (signature) <u>Don Hoobler</u>	

  

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	3	Black silt	68		hard green shale
	3	31	hard brown silt			Stopped.
	31	32	fine brown gravel			
	32	34	soft gray clay			
	34	40	med brown gravel & gray clay (5-10%)			
	40	42	med.-lg. green gravel			
	42	45	sm.-med. green gravel			
	45	46	med. to lg. gray gravel			
	46	48	lg. green gravel			
	48	68	med. to lg. green gravel			

  

ELEVATION: valley

  

Depth(s) Groundwater Encountered	1. <u>27'</u> ft. 2. _____ ft. 3. _____ ft. 4. _____ ft.	(Use a second sheet if needed)
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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.