

1 LOCATION OF WATER WELL
 County: Dickinson Fraction NE 1/4 SE 1/4 SE 1/4 Section Number 17 Township Number T 13 S Range Number R 2 E E/W

Distance and direction from nearest town or city? _____ Street address of well if located within city? 814 NW 3rd St. Abilene Kans

2 WATER WELL OWNER: Tom Noid
 RR#, St. Address, Box #: 814 NW 3rd St.
 City, State, ZIP Code: Abilene Kans 67410
 Board of Agriculture, Division of Water Resources
 Application Number: _____

3 DEPTH OF COMPLETED WELL: 52 ft. Bore Hole Diameter: 6 in. to 52 ft., and _____ in. to _____ ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 6 Oil field water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 7 Lawn and garden only 9 Dewatering 12 Other (Specify below)
 10 Observation well
 Well's static water level: 21 ft. below land surface measured on March month 31 day 1981 year
 Pump Test Data: Well water was ND ft. after 1/2 hours pumping 30 gpm
 Est. Yield 40 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 Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing dia 4 in. to 4.9 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight _____ lbs./ft. Wall thickness or gauge No. SDR 26

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 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: 4 in. to 5.2 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 4.9 ft. to 5.2 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 4.0 ft. to 5.2 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 3 ft. to 13 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 11 Fertilizer storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 15 Oil well/Gas well
 3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines 16 Other (specify below) _____
 Direction from well: West How many feet: 55 ? Water Well Disinfected? Yes No _____
 Was a chemical/bacteriological sample submitted to Department? 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 (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on March month 31 day 1981 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 126
 This Water Well Record was completed on April month 4 day 1981 year under the business name of Hydraulic Drilling Co by (signature) O. J. Jent

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	10	Clay, tan			
10	30	Silt, sandy, tan			
30	35	Sand, fine			
35	43	Clay, grey			
43	52	Sand & gravel			

ELEVATION: _____

Depth(s) Groundwater Encountered 1. 30 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
13
R
2
DN
SEC
17
NE 1/4
SE 1/4
SE 1/4