

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: Dickinson	NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$	35	T 14 S	R 2 (EW)

Distance and direction from nearest town or city? **4 miles west of Navarre** Street address of well if located within city?

2 WATER WELL OWNER: **Vance Hassler**
 RR#, St. Address, Box #: **R.R. # 2** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **Abilene, Kansas 67410** Application Number:

3 DEPTH OF COMPLETED WELL: **70** ft. Bore Hole Diameter: **9** in. to **70** ft., and in. to ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well
 Well's static water level: **46** ft. below land surface measured on **Jan.** month **6** day **1981** year
 Pump Test Data: Well water was ft. after hours pumping gpm
 Est. Yield **25** gpm: Well water was ft. after hours pumping gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Casing Joints: Glued Clamped
 2 PVC 4 ABS 7 Fiberglass SDR Welded
 2 PVC 4 ABS 7 Fiberglass SDR Threaded
 Blank casing dia: **5** in. to **70** ft., Dia in. to ft., Dia in. to ft.
 Casing height above land surface: **26** in., weight **200** lbs./ft. Wall thickness or gauge No. **0.258**
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) SDR
 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: **5** in. to ft., Dia in. to ft., Dia in. to ft.
 Screen-Perforated Intervals: From **43** ft. to **70** ft., From ft. to ft., From ft. to ft.
 Gravel Pack Intervals: From **24** ft. to **70** 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 **24** 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: south How many feet: **500**? 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 (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on **January** month **6** day **1981** year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **397**
 This Water Well Record was completed on **January** month **31** day **1981** year under the business name of **CENTRAL KANSAS DRILLING** by (signature) *Harold D. Martin*

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		TO		LITHOLOGIC LOG	FROM		TO		LITHOLOGIC LOG
		0	1	43	45	Top soil	43	45	45	66
	1	4	45	66	Brown clay	45	66	66	70	Dark gray shale
	4	6	66	70	Limestone	66	70			Lite gray shale
	6	9			Yellow clay					
	9	15			Limestone					
	15	19			Yellow clay					
	19	20			Lite gray clay					
	20	31			Lite yellow clay					
	31	33			Red clay					
	33	41			Yellow clay					
	41	43			Limestone					

ELEVATION: **41** ft. **43** ft. **41** ft. **43** 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.