

1 LOCATION OF WATER WELL
 County: **FRANKLIN** Fraction: **SW 1/4 SW 1/4 SW 1/4** Section Number: **1** Township Number: **T 16 S** Range Number: **R 18 E**

Distance and direction from nearest town or city? **2 m. S. 1/2 W Comdopolis Kans** Street address of well if located within city?

2 WATER WELL OWNER: **BILL THOMPSON**
 RR#, St. Address, Box #: **RR**
 City, State, ZIP Code: **POMONA KANS 66076**
 Board of Agriculture, Division of Water Resources
 Application Number:

3 DEPTH OF COMPLETED WELL: **80** ft. Bore Hole Diameter: **8** in. to **18** ft., and **6 1/4** in. to **80** ft.
 Well Water to be used as:
 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: **20'** ft. below land surface measured on **86** month **16** day **79** year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield **20** 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) Welded _____
 2 PVC 4 ABS 7 Fiberglass _____ Threaded _____
 Blank casing dia: **6 1/4** in. to **18** ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface: **Pump house** in., weight **8 ch 40** lbs./ft. Wall thickness or gauge No. **Sch 40**
 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 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____
 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 Screen-Perforation Dia _____ in. to _____ 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: Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grouted Intervals: From **0** ft. to **18** 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) _____
 Direction from well: **SW** How many feet: **100**? 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 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on **6-46** month **16** day **79** year, and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **124**
 This Water Well Record was completed on **6** month **9** day **80** year under the business name of **EDGAR SWANK Drilling** by (signature) **Edgar Swank**

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	12	Soil			
		12	30	Yellow stone			
		30	45	Grey sand shale			
		45	65	Grey sand			
		65	80	White sand.			

ELEVATION:
 Depth(s) Groundwater Encountered 1. **25** ft. 2. **65** 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.