

LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Dickinson	SW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$	21	T 16 S	R 4 EW

Distance and direction from nearest town or city street address of well if located within city?

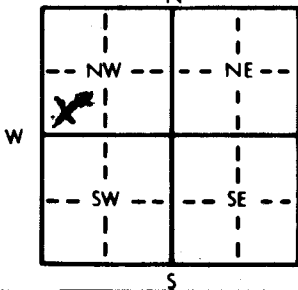
direction from nearest town or city street address or well if located within city?  
 1/4 South & 2 West & 1 1/4 South of Herington  
 WELL OWNER: Vernon H. Orme

WATER WELL OWNER: Vernon H. Orme  
 RR#, St. Address, Box # : 1007 North Broadway  
 City, State, ZIP Code : Herington, Kansas

Board of Agriculture, Division of Water Resources  
Application Number:

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL..... 60 ft. ELEVATION: 50

**AN "X" IN SECTION BOX:**



DEPTH OF COMPLETED WELL ..... ft. ELEVATION ..... ft.

Depth(s) Groundwater Encountered 1. 50 ft. 2. \_\_\_\_\_ ft. 3. \_\_\_\_\_ ft.

WELL'S STATIC WATER LEVEL 30 ft. below land surface measured on mo/day/yr 7-13-89

Pump test data: Well water was 35 ft. after 1/2 hours pumping 30 gpm

Est. Yield 40 gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

Bore Hole Diameter. 8 in. to 60 ft. and \_\_\_\_\_ in. to \_\_\_\_\_ ft.

WELL WATER TO BE USED AS:

5 Public water supply	8 Air conditioning	11 Injection well		
<u>1 Domestic</u>	3 Feedlot	6 Oil field water supply	9 Dewatering	12 Other (Specify below)
2 Irrigation	4 Industrial	7 Lawn and garden only	10 Monitoring well	

Was a chemical/bacteriological sample submitted to Department? Yes.....No...X.....; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes X No

TYPE OF BLANK CASING USED:

Blank casing diameter 5 in. to 60 ft. Dia. in. to \_\_\_\_\_ ft. Dia. \_\_\_\_\_ in. to \_\_\_\_\_ ft. Dia. \_\_\_\_\_

Casing height above land surface 16 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)	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) .....

SCREEN-PERFORATED INTERVALS: From 40 ft. to 60 ft., From . ft. to . ft.  
From . ft. to . ft., From . ft. to . ft.

GRAVEL PACK INTERVALS: From 20 ft. to 60 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

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

Grout Intervals: From 1 1/2 ft. to 20 ft. From . . . ft. to . . . ft. From . . . ft. to . . . ft. From . . . ft. to . . . ft.

What is the nearest source of possible contamination: *Pitless adapter*

1 Septic tank	4 Lateral lines	7 Pit privy	11 Fuel storage	15 Oil well/Gas well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	16 Other (specify below)
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage	

### Direction from well?

How many feet? 2000

[illegible]

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 7-14-89 and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. 513 This Water Well Record was completed on (mo/day/yr) 7-20-89  
under the business name of H2O Drilling Services by (signature) Harry Schroder

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, Bureau of Water Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.