

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: Franklin		S.W. $\frac{1}{4}$ S.E. $\frac{1}{4}$ N.E. $\frac{1}{4}$	#35	T 17 S	R 18 E
Distance and direction from nearest town or city? 1 1/2 miles North of Homewood, Kansas			Street address of well if located within city? <i>They don't want it to be measured</i> <i>Location Confirmed</i>		
2 WATER WELL OWNER: Paul Moore			Board of Agriculture, Division of Water Resources		
RR#, St. Address, Box #: R.R.			Application Number: none		
City, State, ZIP Code: Williamsburg, Kansas					
3 DEPTH OF COMPLETED WELL: 125 ft. Bore Hole Diameter: 9 in. to 22 ft. and 6 1/4 in. to 125 ft.					
Well Water to be used as:			5 Public water supply 8 Air conditioning 11 Injection well 12 Other (Specify below)		
<input checked="" type="checkbox"/> Domestic 2 Irrigation 3 Feedlot 4 Industrial 6 Oil field water supply 7 Lawn and garden only 9 Dewatering 10 Observation well					
Well's static water level: 20 ft. below land surface measured on 8 month 16 day 79 year					
Pump Test Data: Well water was _____ ft. after _____ hours pumping. _____ gpm					
Est. Yield: 3 gpm: Well water was _____ ft. after _____ hours pumping. _____ gpm					
4 TYPE OF BLANK CASING USED:			Casing Joints: Glued _____ Clamped _____		
1 Steel <input checked="" type="checkbox"/> PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)			Welded _____ Threaded _____		
Blank casing dia: 6 1/4 in. to 25 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height above land surface: 18" in., weight Sch. 40 lbs./ft. Wall thickness or gauge No. Sch. 40					
TYPE OF SCREEN OR PERFORATION MATERIAL:			7 PVC 10 Asbestos-cement 11 Other (specify) _____ <input checked="" type="checkbox"/> None used (open hole)		
1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 8 RMP (SR) 9 ABS			5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) _____ <input checked="" type="checkbox"/> None (open hole)		
Screen or Perforation Openings Are:					
1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched					
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: <input checked="" type="checkbox"/> Neat cement			2 Cement grout		
Grouted Intervals: From 3 ft. to 22 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.			3 Bentonite		
What is the nearest source of possible contamination:			4 Other _____		
<input checked="" type="checkbox"/> Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy 7 Sewage lagoon 8 Feed yard 9 Livestock pens 10 Fuel storage 11 Fertilizer storage 12 Insecticide storage 13 Watertight sewer lines 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)					
Direction from well: North How many feet: 100 ? Water Well Disinfected? Yes <input checked="" type="checkbox"/> No					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, date sample was submitted _____ month _____ day _____ year			Pump Installed? Yes _____ No <input checked="" type="checkbox"/>		
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 <input checked="" type="checkbox"/> (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 10 month 4 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 8-16-79 month _____ day _____ year under the business name of Edgar Swank Water Drilling by (signature) <i>Edgar Swank</i>					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG	
		0 3 Soil and Clay			
		3 23 Yellow Sand Rock			
		23 30 Sandy Shale			
		30 33 Gray Sandy Shale			
		33 37 Gray Sand			
		37 42 Gray Sandy Shale			
		42 61 Gray Sand Rock			
		61 67 WhitenSandy Shale			
		67 119 Gray Sandy Shale			
		119 125 Gray Shale			
ELEVATION: _____					
Depth(s) Groundwater Encountered 1. 33 ft. 2. 61 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.