

LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>Lyon</u>	<u>NW 1/4 SE 1/4 SE 1/4</u>	<u>16</u>	T <u>19</u> S	R <u>11</u> E

Distance and direction from nearest town or city? \_\_\_\_\_ Street address of well if located within city? 519 So West

WATER WELL OWNER: Wm Claude Phillips  
 RR#, St. Address, Box #: 519 So West  
 City, State, ZIP Code: Emporia, KS 68801  
 Board of Agriculture, Division of Water Resources  
 Application Number: NA

DEPTH OF COMPLETED WELL: 28 1/2 ft. Bore Hole Diameter: 12 in. to 18 ft., and 8 in. to 28 1/2 ft.

Well Water to be used as:  
 Domestic  Feedlot  Oil field water supply  Air conditioning  Injection well  
 Irrigation  Industrial  Lawn and garden only  Dewatering  Other (Specify below)  
 Observation well

Well's static water level: 21 ft. below land surface measured on 3 month 31 day 82 year

Pump Test Data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping. gpm \_\_\_\_\_  
 Est. Yield 10 gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping. gpm \_\_\_\_\_

TYPE OF BLANK CASING USED:  
 Steel  RMP (SR)  Asbestos-Cement  Other (specify below)  
 PVC  ABS  Fiberglass  Threaded

Casing Joints: Glued  Clamped  Welded \_\_\_\_\_

Blank casing dia: 6 in. to 19 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_

Casing height above land surface: 18 in., weight 160 lbs./ft. Wall thickness or gauge No. 3/8

TYPE OF SCREEN OR PERFORATION MATERIAL:  
 Steel  Stainless steel  Fiberglass  RMP (SR)  Asbestos-cement  
 Brass  Galvanized steel  Concrete tile  ABS  None used (open hole)

Screen or Perforation Openings Are:  
 Continuous slot  Mill slot  Gauzed wrapped  Saw cut  None (open hole)  
 Louvered shutter  Key punched  Wire wrapped  Drilled holes

Screen-Perforation Dia: 6 in. to 29 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_

Screen-Perforated Intervals: From 19 ft. to 28 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Gravel Pack Intervals: From 14 ft. to 29 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GROUT MATERIAL:  Neat cement  Cement grout  Bentonite  Other

Grouted Intervals: From 4 ft. to 14 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:  
 Septic tank  Cess pool  Sewage lagoon  Fuel storage  Abandoned water well  
 Sewer lines  Seepage pit  Feed yard  Fertilizer storage  Oil well/Gas well  
 Lateral lines  Pit privy  Livestock pens  Insecticide storage  Other (specify below)  
 Watertight sewer lines

Direction from well: S How many feet: 70 ? 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:  Submersible  Turbine  Jet  Centrifugal  Reciprocating  Other

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 3 month 31 day 1982 year

and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 203

This Water Well Record was completed on 4 month 1 day 1982 year under the business name of Melvec Drilling & Metals by (signature) [Signature]

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	5	TS Brn			
	5	11	CL Brn			
	11	18	CL-W-Sand			
	18	25	Sand & Gravel			
	25	27	Grzy Dense Lime			
	27	32	Sb Grzy			

Pipe Set at 28 1/2  
Closed End.

ELEVATION: \_\_\_\_\_

Depth(s) Groundwater Encountered 1. 21 ~~25~~ 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.