

1 LOCATION OF WATER WELL County: Linn	Fraction NW SE NE 1/4 SW 1/4 NW 1/4	Section Number 12	Township Number T 21 S	Range Number R 21 EW
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Distance and direction from nearest town or city? **1 mi. n. 1 1/2 mi. w. Centerville, Kansas**

Street address of well if located within city?

2 WATER WELL OWNER: **Gordon Gorrell**
 RR#, St. Address, Box #: **R.R. 1**
 City, State, ZIP Code: **Centerville, Kansas**

Board of Agriculture, Division of Water Resources
Application Number:

3 DEPTH OF COMPLETED WELL: **60** ft. Bore Hole Diameter: **8 1/4** in. to **22 1/2** ft., and **6 1/4** in. to **60** ft.

Well Water to be used as:

<input checked="" type="checkbox"/> Domestic	3 Feedlot	6 Oil field water supply	9 Dewatering	11 Injection well	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 **May** month **24** day **1980** year

Pump Test Data: Well water was _____ ft. after _____ hours pumping. _____ gpm

Est. Yield **1/4 to 1/2** gpm: Well water was **No pump** ft. after **yet** hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
<input checked="" type="checkbox"/> PVC	4 ABS	7 Fiberglass	

Casing Joints: Glued Clamped _____
 Welded _____
 Threaded _____

Blank casing dia **6** in. to **22 1/2** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface: **1 1/2** in., weight **Sch 40** lbs./ft. Wall thickness or gauge No **0.280**

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement	11 Other (specify) none
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	<u>12 None used (open hole)</u>	

Screen or Perforation Openings Are:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	8 Saw cut	<u>11 None (open hole)</u>
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify) none	

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: 1 Neat cement Cement grout 3 Bentonite 4 Other _____

Grouted Intervals: From **22 1/2** ft. to **Surface** 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	<input checked="" type="checkbox"/> Livestock pens	12 Insecticide storage	16 Other (specify below)
			13 Watertight sewer lines	

Direction from well **South to pasture** How many feet **50**? Water Well Disinfected? Yes No _____

Was a chemical/bacteriological sample submitted to Department? Yes _____ No **not yet** If yes, date sample was submitted _____ month _____ day _____ year Pump Installed? Yes _____ No _____

If Yes: Pump Manufacturer's name **None at this time** 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 **May** month **24** day **1980** year

and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **107**

This Water Well Record was completed on **July** month **23** day **1980** year under the business name of **Swank Water Well Drilling** by (signature) **George H. Swank**

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		TO		LITHOLOGIC LOG		FROM		TO		LITHOLOGIC LOG	
	Section	Depth	Section	Depth	Section	Depth	Section	Depth	Section	Depth	Section	Depth
	3	0	3	3								
	10	3	13	13								
	3	13	16	16								
	8	16	24	24								
	21	24	45	45								
	10	45	55	55								
5	55	60	60									

ELEVATION:

Depth(s) Groundwater Encountered **1. 24** ft. **2. 55** 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.

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