

[Handwritten initials]

1 LOCATION OF WATER WELL
 County: HARVEY Fraction: C 2 of S 1/2 of SE 1/4 Section Number: 14 7 Township Number: T 23 S Range Number: R 10 E
 Distance and direction from nearest town or city? _____ Street address of well if located within city? 1509 Berry

2 WATER WELL OWNER: Dale L. Clark
 RR#, St. Address, Box #: 1509 Berry
 City, State, ZIP Code: Newton, Kansas 67114
 Board of Agriculture, Division of Water Resources
 Application Number: _____

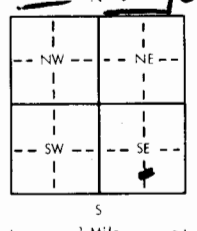
3 DEPTH OF COMPLETED WELL: 71 ft. Bore Hole Diameter: 10 in. to 30 ft., and 9 in. to 71 ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 5 Public water supply 7 Lawn and garden only 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 10 Observation well
 Well's static water level: 20 ft. below land surface measured on March month 30 day 80 year
 Pump Test Data: Well water was 20 ft. after 1 hours pumping. 15 gpm
 Est. Yield 15 gpm: Well water was 30 ft. after 1 hours pumping. 15 gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued _____ Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded ✓
 7 Fiberglass _____ Threaded _____
 Blank casing dia: 5 in. to 71 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 18 in., weight 200 lbs./ft. Wall thickness or gauge No. 3/16"
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement
 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 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) _____
 Screen-Perforation Dia: _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 20 ft. to 40 ft., From 50 ft. to 65 ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 10 ft. to 71 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grouted Intervals: From Top ft. to 10' 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 11 Fertilizer storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 15 Oil well/Gas well
 3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines 16 Other (specify below) _____
 Direction from well: South How many feet: 20' ? 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 1 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on March month 30 day 1980 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 221
 This Water Well Record was completed on Nov month 18 day 1980 year under the business name of Frank Budde by (signature) Frank Budde

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3'	Top Soil			
3'	22'	Brown Clay			
22'	29'	Sand			
29'	49'	Blue shale			
49'	54'	Rky Blue shale			
54'	71'	Blue shale			

ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 22 ft. 2. 50 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.

OFFICE USE ONLY
T
R
SEC.
C of S 1/4 SE 1/4