

1 LOCATION OF WATER WELL  
 County: **HARVEY** Fraction **SW 1/4 NW 1/4 NW 1/4** Section Number **8** Township Number **T 23 S** Range Number **R 1 EW**  
 Distance and direction from nearest town or city? Street address of well if located within city? **704 NORTH Ridge NEWTON, KS**

2 WATER WELL OWNER: **JAY HILL**  
 RR#, St. Address, Box #: **704 NORTH Ridge** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: **NEWTON, KS 67114** Application Number:

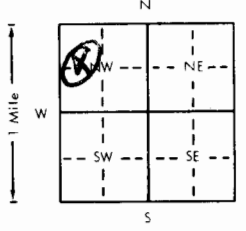
3 DEPTH OF COMPLETED WELL: **48** ft. Bore Hole Diameter: **11** in. to ... ft., and ... in. to ... ft.  
 Well Water to be used as:  
 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well  
 2 Irrigation 4 Industrial **7 Lawn and garden only** 9 Dewatering 12 Other (Specify below)  
 10 Observation well  
 Well's static water level: **20** ft. below land surface measured on ... month ... day ... year  
 Pump Test Data: Well water was: **45** ft. after **2** days hours pumping: **12-15** gpm  
 Est. Yield: **12/15** gpm: Well water was ... ft. after ... hours pumping ... 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 **48** ft., Dia ... in. to ... ft., Dia ... in. to ... ft.  
 Casing height above land surface: **18** in., weight **2.37** lbs./ft. Wall thickness or gauge No: **214**  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) **1020** 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 factory** 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: **5** in. to **45** ft., Dia ... in. to ... ft., Dia ... in. to ... ft.  
 Screen-Perforated Intervals: From **20** ft. to **30** ft., From ... ft. to ... ft.  
 From **35** ft. to **45** ft., From ... ft. to ... ft.  
 Gravel Pack Intervals: From **10** ft. to **48** ft., From ... ft. to ... 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 **0** 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 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 9 Livestock pens 12 Insecticide storage 16 Other (specify below)  
 13 Watertight sewer lines  
 Direction from well: **South** How many feet: **30'** ? Water Well Disinfected?  Yes  No  
 Was a chemical/bacteriological sample submitted to Department? Yes  No  No If yes, date sample was submitted ... month ... day ... year Pump Installed? Yes  No  No  
 If Yes: Pump Manufacturer's name: **Dempster** Model No: **15C2-33-SAP** 1/3 Volts: **220**  
 Depth of Pump Intake: **40** ft. Pumps Capacity rated at: **15** gal./min.  
 Type of pump: **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 **10** month **10** day **80** year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **#175**  
 This Water Well Record was completed on **11** month **6** day **80** year under the business name of **PAUL'S INC.** by (signature) **Paul Burchhart**

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



FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	5	LOAM to			
5	10	BROWN CLAY			
10	15	SAND FINE / LAYERED CLAY			
15	20	SAND RED CLAY "			
20	25	RED BR CLAY			
25	30	RL " "			
30	35	" " "			
35	40	" SANDY BR. CLAY			
40	45	SAND-MED FINE			
45	48	GREEN/GRY SHALE			

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