

1 LOCATION OF WATER WELL County: <u>HARVEY</u>	Fraction <u>NW 1/4 NW 1/4 NW 1/4</u>	Section Number <u>17</u>	Township Number <u>T 23 S</u>	Range Number <u>R 1 E</u>
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Distance and direction from nearest town or city? _____ Street address of well if located within city? 517W 12TH

2 WATER WELL OWNER: O E BRUNNER
 RR#, St. Address, Box #: 517W 12TH
 City, State, ZIP Code: NEWTON KS 67114
 Board of Agriculture, Division of Water Resources
 Application Number: _____

3 DEPTH OF COMPLETED WELL: 70 ft. Bore Hole Diameter: 10 in. to 25 ft., and 7 in. to 70 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 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 7 Lawn and garden only 10 Observation well
 Well's static water level: 20 ft. below land surface measured on NOV month 1 day 1980 year
 Pump Test Data: Well water was 65 ft. after 1 hours pumping 5 gpm
 Est. Yield 5 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 30 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 18 in., weight 2.20 lbs./ft. Wall thickness or gauge No. 320

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify)
 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: 5 in. to 70 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 30 ft. to 70 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 10 ft. to 70 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? X
 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)
 3 Watertight sewer lines
 Direction from well: West How many feet: 15 ? 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: PUMP CO Model No. 4102558 HP 1/2 Volts 230
 Depth of Pump Intake: 65 ft. Pumps Capacity rated at 10 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 OCT month 27 day 1980 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 211
 This Water Well Record was completed on DEC month 1 day 1980 year under the business name of D & R WELL SERVICE by (signature) W. Williams

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	<u>0</u>	<u>2</u>	<u>TOP SOIL</u>			
	<u>2</u>	<u>10</u>	<u>SANDY CLAY</u>			
	<u>10</u>	<u>22</u>	<u>SAND FINE</u>			
	<u>22</u>	<u>55</u>	<u>SHALE GREY</u>			
	<u>55</u>	<u>57</u>	<u>LIMESTONE</u>			
	<u>57</u>	<u>70</u>	<u>SHALE GREY</u>			

Groundwater Encountered 1. 22 ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)

NOTATIONS: 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 one for your records.

OFFICE USE ONLY
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R
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EW
SEC
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NW 1/4
NW 1/4
NW 1/4