

1 LOCATION OF WATER WELL  
 County: Harnett Fraction: SW 1/4 SW 1/4 NW 1/4 Section Number: 19 Township Number: T 23 S Range Number: R 1 EW

Distance and direction from nearest town or city? 1/2 north of Hwy 50, E. side of Meridian Newton, Kansas  
 Street address of well if located within city?

2 WATER WELL OWNER: Tom Warner, Co.  
 RR#, St. Address, Box #: 426 South Meridian  
 City, State, ZIP Code: Valley Center, Ks. Board of Agriculture, Division of Water Resources  
 Application Number:

3 DEPTH OF COMPLETED WELL: 90 ft. Bore Hole Diameter: 11 in. to . . . . . ft., and . . . . . in. to . . . . . ft.

Well Water to be used as:  
 1 Domestic 3 Feedlot 6 Oil field 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: 13 ft. below land surface measured on . . . . . 5 month . . . . . 31 day . . . . . 1979 year

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

4 TYPE OF BLANK CASING USED:  
 1 Steel 3 RMP (SB) 6 Asbestos-Cement 8 Concrete tile 9 Other (specify below) Casing Joints: Glued X Clamped . . . . .  
 2 PVC 4 ABS 7 Fiberglass . . . . . Welded . . . . .  
 . . . . . Threaded . . . . .

Blank casing dia: 5 in. to 17 ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.  
 Casing height above land surface: 12 in., weight . . . . . lbs./ft. Wall thickness or gauge No. 200

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) . . . . .  
 12 None used (open hole)

Screen or Perforation Openings Are:  
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut .06 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 90 ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.  
 Screen-Perforated Intervals: From 17 ft. to 90 ft., From . . . . . ft. to . . . . . ft.  
 From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  
 Gravel Pack Intervals: From 14 ft. to 90 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 40 ft. to 14 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)  
None apparent

Direction from well . . . . . How many feet . . . . . ? Water Well Disinfected? Yes X No

Was a chemical/bacteriological sample submitted to Department? Yes . . . . . No X If yes, date sample  
 was submitted . . . . . month . . . . . day . . . . . year: Pump Installed? Yes X No

If Yes: Pump Manufacturer's name: Sta-Rite Model No. 8 Series HP 1/2 Volts 230  
 Depth of Pump Intake: 80 ft. Pumps Capacity rated at 8 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 . . . . . 5 month . . . . . 31 day . . . . . 1979 year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236  
 This Water Well Record was completed on . . . . . 3 month . . . . . 14 day . . . . . 1980 year under the business  
 name of Harp Well & Pump Serv, Inc. by (signature) M. Arnold

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
  
 FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG  
0 3 Topsoil  
3 13 Clay  
13 14 Fine Sand  
14 16 Clay  
16 20 Fine Sand with Clay streaks  
20 90 Grey Shale

ELEVATION:  
 Depth(s) Groundwater Encountered 1. 13 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.

OFFICE USE ONLY

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EW

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SW 1/4 NW 1/4