

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County:	Harvey	NW ¼ NW ¼ NE ¼	29	T 23 S	R 1 E

Distance and direction from nearest town or city street address of well if located within city?

1420 Old Main Street, Newton

2	WATER WELL OWNER:	Hill C Store c/o KDHE	
RR#, St. Address, Box #	:	1000 SW Jackson #410	Board of Agriculture, Division of Water Resources
City, State, ZIP Code	:	Topeka, Ks 66612-1367	Application Number:

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

4 DEPTH OF COMPLETED WELL 20 ft. ELEVATION: _____

Depth(s) Groundwater Encountered 1 15 Ft. 2 _____ ft. 3 _____ Ft.

WELL'S STATIC WATER LEVEL 5.20 ft. below land surface measured on mo/day/yr 09/10/03

Pump test data: Well water was _____ Ft. after _____ hours pumping _____ Gpm

Est. Yield _____ Gpm Well water was _____ Ft. after _____ Hours pumping _____ Gpm

Bore Hole Diameter 8.625 in. to 20 ft. and _____ in. to _____ Ft.

WELL WATER TO BE USED AS:

1 Domestic	3 Feed lot	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)

2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well **MW-4**

Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X** If yes, mo/day/yr sample was Submitted _____

Water Well Disinfected? Yes _____ No **X**

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued	Clamped
2 PVC	4 ABS	7 Fiberglass		Welded	
				Threaded	X

Blank casing diameter 2 in. to 5 Ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface FLUSH In., weight SCH 40 Lbs./ft. Wall thickness or gauge No.

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-PERFORATED INTERVALS: From 5 ft. to 20 ft. From ft. to ft. From ft. to ft. From ft. to ft.

SAND PACK INTERVALS: From 3 ft. to 20 ft. From ft. to ft. From ft. to ft. From ft. to ft.

6	GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____				
	Grout Intervals From <u>3</u> <u>0</u> ft. to <u>1</u> Ft. From <u>2</u> <u>1</u> Ft. to <u>3</u> ft. From _____ ft. to _____ ft.				
What is the nearest source of possible contamination:					10 Livestock pens 14 Abandoned water well
1 Septic tank	4 Lateral lines	7 Pit privy	11 Fuel storage	15 Oil well/ Gas well	
2 Sewer lines	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	16 Other (specify below)	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage		Contaminated Site

[illegible]

7. CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was Completed on (mo/day/yr) **10/03/03** And this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **585** This Water Well Record was completed on (mo/day/yr) **09/03/03** under the business name of **Associated Environmental, Inc.** By (signature) **Darin R Duncan**

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.