

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Harvey	NW $\frac{1}{4}$ NW $\frac{1}{4}$ NE $\frac{1}{4}$	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:

<p>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</p> <div style="text-align: center;"> </div>	<p>4 DEPTH OF COMPLETED WELL <u>20</u> ft. ELEVATION: _____</p> <p>Depth(s) Groundwater Encountered <u>1</u> <u>15</u> ft. <u>2</u> _____ ft. <u>3</u> _____ ft.</p> <p>WELL'S STATIC WATER LEVEL <u>4.26</u> ft. below land surface measured on mo/day/yr <u>09/10/03</u></p> <p>Pump test data: Well water was _____ Ft. after _____ hours pumping _____ Gpm</p> <p>Est. Yield _____ Gpm: Well water was _____ Ft. after _____ Hours pumping _____ Gpm</p> <p>Bore Hole Diameter <u>8.625</u> In. to <u>20</u> ft. and _____ in. to _____ Ft.</p> <p>WELL WATER TO BE USED AS:</p> <table style="width: 100%;"> <tr> <td>5 Public water supply</td> <td>8 Air conditioning</td> <td>11 Injection well</td> </tr> <tr> <td>1 Domestic</td> <td>3 Feed lot</td> <td>6 Oil field water supply</td> </tr> <tr> <td>9 Dewatering</td> <td>12 Other (Specify below)</td> <td></td> </tr> <tr> <td>2 Irrigation</td> <td>4 Industrial</td> <td>7 Lawn and garden (domestic)</td> </tr> <tr> <td>10 Monitoring well</td> <td colspan="2">MW-5</td> </tr> </table> <p>Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was Submitted _____</p> <p>Water Well Disinfected? Yes _____ No <u>X</u></p>	5 Public water supply	8 Air conditioning	11 Injection well	1 Domestic	3 Feed lot	6 Oil field water supply	9 Dewatering	12 Other (Specify below)		2 Irrigation	4 Industrial	7 Lawn and garden (domestic)	10 Monitoring well	MW-5	
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5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued	Clamped
2 <u>PVC</u>	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded	
		7 Fiberglass		<u>Threaded</u>	<u>X</u>

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

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 <u>PVC</u>	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 <u>Mill slot</u>	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.

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

6	GROUT MATERIAL:				1 Neat cement	2 Cement grout	3 Bentonite	4 Other _____																
Grout Intervals	From	3	0	ft. to	1	Ft.	From	2	1	Ft.	to	3	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				
Direction from well?										How many feet?														

[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.	