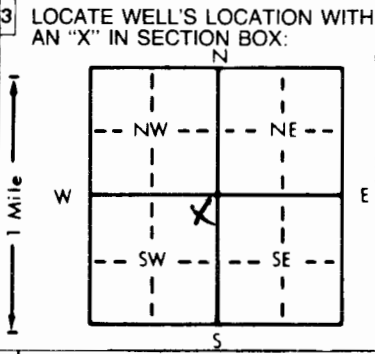


4402

1 LOCATION OF WATER WELL: Fraction NE 1/4 NE 1/4 SW 1/4 Section Number 17 Township Number T 23 S Range Number R 1 E EW
 County: HARVEY

Distance and direction from nearest town or city street address of well if located within city?
132 W 5TH ST - NEWTON

2 WATER WELL OWNER: CITY OF NEWTON
 RR#, St. Address, Box # ATT. RICHARD OLLER - PO BOX 426 - NEWTON K.S. 67114 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code Application Number:



4 DEPTH OF COMPLETED WELL: 15 ft. ELEVATION:
 Depth(s) Groundwater Encountered 1 NOT APPARENT ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 10.32 ft. below land surface measured on mo/day/yr 08-16-94
 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 15 ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well
 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: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
12 PVC 4 ABS 7 Fiberglass Threaded X
 Blank casing diameter _____ in. to 5 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface GL 0 in., weight SCH 40 lbs./ft. Wall thickness or gauge No. _____
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes _____
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From 5 ft. to 15 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
SAUD
~~GRAVEL~~ PACK INTERVALS: From 4 ft. to 15 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 GL 0 ft. to 2 ft., From 2 ft. to 4 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 TK REMOVED 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 _____

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>GL-D</u>	<u>1</u>	<u>ASPHALT + SD.</u>			
<u>1</u>	<u>4</u>	<u>SILTY CLAY</u>			
<u>4</u>	<u>10</u>	<u>SANDY CLAY</u>			
<u>10</u>	<u>15</u>	<u>SHALE</u>			
<u>TD</u>	<u>15</u>				
		<u>FLUSH MOUNT WATER</u>			
		<u>09-19-94</u>			
		<u>DOV TAYLOR</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 08-08-94 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 479 This Water Well Record was completed on (mo/day/yr) 09-06-94 under the business name of EBBERTS DRILLING by (signature) [Signature]

OFFICE USE ONLY
T
R
EW
SEC.