

1 LOCATION OF WATER WELL:		Fraction			Section Number		Township Number			Range Number		
County: Harvey		SE ¼ SE ¼ SE ¼			20		T 24 S			R 1 E E/W		

2	WATER WELL OWNER:	S.E. Gill	
	RR#, St. Address, Box # :	Route 5, Box 194C	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code :	Newton, Kansas 67114	Application Number:

Depth(s) Groundwater Encountered 1. 30 ft. 2. 30 ft. 3. 30 ft.

WELL'S STATIC WATER LEVEL 38 ft. below land surface measured on mo/day/yr 1-27-83

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 11 in. to _____ 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
2 Irrigation	4 Industrial	7 Lawn and garden only
		10 Observation well

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

Water Well Disinfected? Yes ☒ No _____

Blank casing diameter 5 in. to 45 ft., Dia in. to ft., Dia in. to ft.
Casing height above land surface 12 in., weight 1.59 lbs./ft. Wall thickness or gage No. 203 SDR-26

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	<u>8 Saw cut</u>	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify)	

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
Grout Intervals: From 40" ft. to 14 ft. From ft. to ft. From ft. to ft.

[illegible]

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, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.