

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number																																																																		
County: <u>HARVEY</u>		<u>NE 1/4 SW 1/4 SE 1/4</u>	<u>20</u>	T <u>24</u> S	R <u>1</u> <u>E/W</u>																																																																		
Distance and direction from nearest town or city street address of well if located within city? <u>6 mile S of Newton</u>																																																																							
2 WATER WELL OWNER: <u>David Hewitt</u>																																																																							
RR#, St. Address, Box #: <u>RR #5</u>																																																																							
City, State, ZIP Code: <u>Newton, KS 67114</u>																																																																							
Board of Agriculture, Division of Water Resources Application Number:																																																																							
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>57</u> ft. ELEVATION:																																																																					
		Depth(s) Groundwater Encountered 1. <u>31</u> ft. 2. <u>46</u> ft. 3. _____ ft.																																																																					
		WELL'S STATIC WATER LEVEL <u>27</u> ft. below land surface measured on mo/day/yr <u>2-9-88</u>																																																																					
		Pump test data: Well water was <u>36</u> ft. after <u>2</u> hours pumping <u>257</u> gpm																																																																					
		Est. Yield <u>30</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm																																																																					
		Bore Hole Diameter <u>11</u> in. to <u>57</u> ft. and _____ in. to _____ ft.																																																																					
WELL WATER TO BE USED AS:																																																																							
<input checked="" type="checkbox"/> 1 Domestic <input type="checkbox"/> 3 Feedlot <input type="checkbox"/> 6 Oil field water supply <input type="checkbox"/> 9 Dewatering <input type="checkbox"/> 12 Other (Specify below) <input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 4 Industrial <input type="checkbox"/> 7 Lawn and garden only <input type="checkbox"/> 10 Observation well																																																																							
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____																																																																							
Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____																																																																							
5 TYPE OF BLANK CASING USED:																																																																							
<input checked="" type="checkbox"/> 1 Steel <input type="checkbox"/> 3 RMP (SR) <input type="checkbox"/> 5 Wrought iron <input type="checkbox"/> 8 Concrete tile CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____ <input checked="" type="checkbox"/> 2 PVC <input type="checkbox"/> 4 ABS <input type="checkbox"/> 6 Asbestos-Cement <input type="checkbox"/> 9 Other (specify below) Welded _____ <input type="checkbox"/> 7 Fiberglass Threaded _____																																																																							
Blank casing diameter <u>5</u> in. to <u>47</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.																																																																							
Casing height above land surface <u>18</u> in., weight <u>2.37</u> lbs./ft. Wall thickness or gauge No. <u>1214</u>																																																																							
TYPE OF SCREEN OR PERFORATION MATERIAL:																																																																							
<input type="checkbox"/> 1 Steel <input type="checkbox"/> 3 Stainless steel <input type="checkbox"/> 5 Fiberglass <input checked="" type="checkbox"/> 7 PVC <input type="checkbox"/> 10 Asbestos-cement <input type="checkbox"/> 2 Brass <input type="checkbox"/> 4 Galvanized steel <input type="checkbox"/> 6 Concrete tile <input type="checkbox"/> 8 RMP (SR) <input type="checkbox"/> 11 Other (specify) _____ <input type="checkbox"/> 12 None used (open hole)																																																																							
SCREEN OR PERFORATION OPENINGS ARE:																																																																							
<input type="checkbox"/> 1 Continuous slot <input type="checkbox"/> 3 Mill slot <input type="checkbox"/> 5 Gauzed wrapped <u>factory</u> <input checked="" type="checkbox"/> 8 Saw cut <u>.030</u> <input type="checkbox"/> 11 None (open hole) <input type="checkbox"/> 2 Louvered shutter <input type="checkbox"/> 4 Key punched <input type="checkbox"/> 6 Wire wrapped <input type="checkbox"/> 9 Drilled holes <input type="checkbox"/> 7 Torch cut <input type="checkbox"/> 10 Other (specify) _____																																																																							
SCREEN-PERFORATED INTERVALS: From <u>47</u> ft. to <u>57</u> ft., From _____ ft. to _____ ft.																																																																							
GRAVEL PACK INTERVALS: From <u>30</u> ft. to <u>57</u> ft., From _____ ft. to _____ ft.																																																																							
6 GROUT MATERIAL: <input type="checkbox"/> 1 Neat cement <input type="checkbox"/> 2 Cement grout <input checked="" type="checkbox"/> 3 Bentonite <input type="checkbox"/> 4 Other _____																																																																							
Grout Intervals: From <u>0</u> ft. to <u>20</u> ft., From _____ ft. to _____ ft.																																																																							
What is the nearest source of possible contamination:																																																																							
<input checked="" type="checkbox"/> 1 Septic tank <input type="checkbox"/> 4 Lateral lines <input type="checkbox"/> 7 Pit privy <input type="checkbox"/> 10 Livestock pens <input type="checkbox"/> 14 Abandoned water well <input checked="" type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 5 Cess pool <input type="checkbox"/> 8 Sewage lagoon <input type="checkbox"/> 11 Fuel storage <input type="checkbox"/> 15 Oil well/Gas well <input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 9 Feedyard <input type="checkbox"/> 12 Fertilizer storage <input type="checkbox"/> 16 Other (specify below) _____ <input type="checkbox"/> 13 Insecticide storage																																																																							
Direction from well? <u>45°</u> How many feet? <u>West</u>																																																																							
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> </tr> </thead> <tbody> <tr> <td><u>0</u></td> <td><u>5</u></td> <td><u>loam to clay</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><u>5</u></td> <td><u>15</u></td> <td><u>red brown clay</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><u>15</u></td> <td><u>22</u></td> <td><u>light red-brown clay</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><u>22</u></td> <td><u>25</u></td> <td><u>light tan clay</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><u>25</u></td> <td><u>31</u></td> <td><u>sandy brown clay</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><u>31</u></td> <td><u>36</u></td> <td><u>fine sand</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><u>36</u></td> <td><u>40</u></td> <td><u>light grey clay</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><u>40</u></td> <td><u>46</u></td> <td><u>brown-tan clay</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><u>46</u></td> <td><u>55</u></td> <td><u>sand-sharp - med to coarse</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><u>55</u></td> <td><u>57</u></td> <td><u>gray-green shale</u></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	<u>0</u>	<u>5</u>	<u>loam to clay</u>				<u>5</u>	<u>15</u>	<u>red brown clay</u>				<u>15</u>	<u>22</u>	<u>light red-brown clay</u>				<u>22</u>	<u>25</u>	<u>light tan clay</u>				<u>25</u>	<u>31</u>	<u>sandy brown clay</u>				<u>31</u>	<u>36</u>	<u>fine sand</u>				<u>36</u>	<u>40</u>	<u>light grey clay</u>				<u>40</u>	<u>46</u>	<u>brown-tan clay</u>				<u>46</u>	<u>55</u>	<u>sand-sharp - med to coarse</u>				<u>55</u>	<u>57</u>	<u>gray-green shale</u>			
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> (1) constructed, <input type="checkbox"/> (2) reconstructed, or <input type="checkbox"/> (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>2-9-88</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>457</u> This Water Well Record was completed on (mo/day/yr) <u>2-26-88</u> under the business name of <u>United Water Well & Pump</u> by (signature) <u>Paul Burchett</u>																																																																							
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, Bureau of Water Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.																																																																							

OFFICE USE ONLY

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