

LOCATION OF WATER WELL: County: SEDGWICK Fraction: SW 1/4 SE 1/4 SE 1/4 Section Number: 31 Township Number: T 25 S Range Number: R 2 E QW
 Distance and direction from nearest town or city? _____ Street address of well if located within city? 7620 EAST 77th NORTH VALLEY CENTER, KANSAS

WATER WELL OWNER: NIDA WISWELL
 Well #, St. Address, Box #: 7620 E. 77th NORTH Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: VALLEY CENTER, KANSAS Application Number: _____

DEPTH OF COMPLETED WELL: 75 ft. Bore Hole Diameter: 11 in. to _____ ft., and _____ in. to _____ ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 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)
 7 Lawn and garden only 10 Observation well
 Well's static water level: 18 ft. below land surface measured on _____ month _____ day _____ year
 Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Test Yield: Well water was _____ ft. after _____ hours pumping _____ gpm

TYPE OF BLANK CASING USED:
 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) 10 Asbestos-cement
 Casing Joints: Glued Clamped _____
 Welded _____
 Threaded _____
 Blank casing dia: 5 in. to 18 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight _____ lbs./ft. Wall thickness or gauge No. 300

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) _____ 12 None used (open hole)
 Screen or Perforation Openings Are:
 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut .06 11 None (open hole)
 Screen-Perforation Dia: 5 in. to 18 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 18 ft. to 75 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 14 ft. to 75 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

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

What is the nearest source of possible contamination:
 1 Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy 7 Sewage lagoon 8 Feed yard 9 Livestock pens 10 Fuel storage 11 Fertilizer storage 12 Insecticide storage 13 Watertight sewer lines 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)
 Direction from well: NORTH How many feet: 120? Water Well Disinfected? Yes No _____
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No
 If Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____
 Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ gal./min.
 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month _____ day _____ year, and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236
 This Water Well Record was completed on _____ month _____ day _____ year under the business name of HARP WELL & PUMP SERVICE INC. (signature) m. arnold

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	3	TOPSOIL			
	3	18	CLAY			
	18	25	FINE SAND			
	25	73	GREY SHALE			
	73	75	LIMESTONE			

ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 18 ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)

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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.