

1 LOCATION OF WATER WELL:		Fraction County: <i>Bryher</i>	1/4 NW 1/4 NW 1/4	Section Number 19	Township Number T 26 S	Range Number R 40 EW			
Distance and direction from nearest town or city street address of well if located within city? <i>2 West / South of Towanda</i>									
2 WATER WELL OWNER:		<i>Terry Wyllie</i>		<i>Towanda Kan</i>					
RR#, St. Address, Box #:		<i>P.O. Box 42 A</i>		Board of Agriculture, Division of Water Resources					
City, State, ZIP Code		<i>67744</i>		Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:									
4 DEPTH OF COMPLETED WELL:		125 ft. ELEVATION: _____							
Depth(s) Groundwater Encountered		125 ft. ft. 2. ft. 3. ft.							
WELL'S STATIC WATER LEVEL		55 ft. below land surface measured on mo/day/yr							
Pump test data: Well water was		ft. after hours pumping gpm							
Est. Yield <i>3015</i> gpm		ft. after hours pumping gpm							
Bore Hole Diameter <i>8 1/2</i> 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 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 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 <input type="checkbox"/>							
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____							
1 Steel <i>3</i> RMP (SR)		Welded _____							
2 PVC <i>4</i> ABS		Threaded _____							
Blank casing diameter <i>5</i> in. to <i>80</i> ft., Dia.		in. to ft., Dia. in. to ft. in. to ft.							
Casing height above land surface <i>18</i> in., weight <i>200</i>		lbs./ft. Wall thickness or gauge No. <i>214</i>							
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC 10 Asbestos-cement 5 Fiberglass <i>8</i> RMP (SR) 11 Other (specify) 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) 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify)							
1 Continuous slot 3 Mill slot									
2 Louvered shutter 4 Key punched									
SCREEN-PERFORATED INTERVALS: From <i>80</i> ft. to <i>125</i> ft., From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.									
6 GROUT MATERIAL: 1 Neat cement <i>2</i> Cement grout		3 Bentonite 4 Other							
Grout Intervals: From <i>3</i> ft. to <i>13</i> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		10 Livestock pens 14 Abandoned water well 11 Fuel storage 15 Oil well/Gas well 12 Fertilizer storage 16 Other (specify below)							
What is the nearest source of possible contamination:		7 Pit privy 8 Sewage lagoon 9 Feedyard 13 Insecticide storage							
1 Septic tank 4 Lateral lines									
2 Sewer lines 5 Cess pool									
3 Watertight sewer lines 6 Seepage pit									
Direction from well? <i>N</i>		How many feet? <i>150</i>							
FROM	TO	LITHOLOGIC LOG			FROM	TO	LITHOLOGIC LOG		
<i>9</i>	<i>7</i>	<i>SOIL</i>							
<i>18</i>	<i>18</i>	<i>Clay</i>							
<i>50</i>	<i>28</i>	<i>Rock</i>							
<i>45</i>	<i>45</i>	<i>Shale</i>							
<i>45</i>	<i>125</i>	<i>Lime</i>							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) <i>5/3/86</i> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <i>235</i> This Water Well Record was completed on (mo/day/year) <i>5/10/86</i> under the business name of <i>Winter Well Drill</i> by (signature) <i>Shelley Winter</i>									
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.									