

**1 LOCATION OF WATER WELL**  
 County: Sedgwick Fraction: SW 1/4 SW 1/4 SW 1/4 Section Number: 36 Township Number: T 28 S Range Number: R 1E EW  
 Distance and direction from nearest town or city? \_\_\_\_\_ Street address of well if located within city? 7130 Milton Dr. Derby, Kansas

**2 WATER WELL OWNER:** Packard Lamont  
 RR#, St. Address, Box #: 7130 Milton Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Derby, Kansas 67037 Application Number: \_\_\_\_\_

**3 DEPTH OF COMPLETED WELL** 60 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: 30 ft. below land surface measured on \_\_\_\_\_ month 3 day 1979 year  
 Pump Test Data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Est. Yield \_\_\_\_\_ gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

**4 TYPE OF BLANK CASING USED:**  
 1 Steel 3 BMP (SB) 5 Wrought iron 8 Concrete tile Casing Joints: Glued  Clamped \_\_\_\_\_  
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded \_\_\_\_\_  
 7 Fiberglass \_\_\_\_\_ Threaded \_\_\_\_\_  
 Blank casing dia 5 in. to 40 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface: 12 in., weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No. 200  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 3 Stainless steel 5 Fiberglass 8 BMP (SB) 10 Asbestos-cement 11 Other (specify) \_\_\_\_\_  
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)  
 Screen or Perforation Openings Are:  
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut .06 11 None (open hole)  
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes  
 7 Torch cut 10 Other (specify) \_\_\_\_\_  
 Screen-Perforation Dia: 5 in. to 60 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Screen-Perforated Intervals: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 Gravel Pack Intervals: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**5 GROUT MATERIAL:** 1 Neat cement 2 Cement grout 3 Bentonite 4 Other \_\_\_\_\_  
 Grouted Intervals: From 40" 27' to 14 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 What is the nearest source of possible contamination: Septic System not installed Fuel storage 14 Abandoned water well  
 1 Septic tank 4 Cess pool at this time 7 Sewage lagoon 11 Fertilizer storage 15 Oil well/Gas well  
 2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 16 Other (specify below)  
 3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines None Apparent  
 Direction from well \_\_\_\_\_ How many feet \_\_\_\_\_ ? 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: Sta-Rite Model No. 8 Series \_\_\_\_\_ HP 1/2 Volts 110  
 Depth of Pump Intake: 45 ft. Pumps Capacity rated at \_\_\_\_\_ gal./min.  
 Type of pump: 1 Submersible  2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other \_\_\_\_\_

**6 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. \_\_\_\_\_  
 This Water Well Record was completed on \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year under the business name of Harp Well & Pump Service, Inc. by (signature) M. Arnold

**7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Topsoil			
3	39	Clay			
39	46	Fine Sand			
46	60	Grey Shale			

**ELEVATION:**  
 Depth(s) Groundwater Encountered 1. 39 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.

OFFICE USE ONLY  
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 28  
 R  
 1  
 EW  
 SEC  
 36  
 SW 1/4 SW 1/4 SW 1/4 SW 1/4