

1 LOCATION OF WATER WELL
 County: Washington Fraction: NE 1/4 NE 1/4 NE 1/4 Section Number: 5 Township Number: T 2 S Range Number: R 1 E

Distance and direction from nearest town or city? Haddam 4 1/2 Street address of well if located within city?

2 WATER WELL OWNER: Kevin W. Cromwell
 RR#, St. Address, Box #: _____ Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Haddam, Kans. 66944 Application Number: _____

3 DEPTH OF COMPLETED WELL: 90 ft. Bore Hole Diameter: 9 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 _____ day _____ year
 Pump Test Data: _____ Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield: 10 gpm: _____ Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 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 60 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface: 20 in., weight: 200 lbs./ft. Wall thickness or gauge No. _____
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____
 12 None used (open hole)
 Screen or Perforation Openings Are:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 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 _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 60 ft. to 80 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 20 ft. to 90 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 0 ft. to 20 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below) _____
 13 Watertight sewer lines
 Direction from well: EAST How many feet: 75 ? 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 _____

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on November month 22 day 1988 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 234
 This Water Well Record was completed on 4 month 30 day 1989 year under the business name of Blue Valley Drilling by (signature) Betty Jo Studer

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	15	Brown clay			
15	25	Tan clay			
25	30	Yellow clay			
30	70	Gray clay			
70	90	sandstone			

ELEVATION: _____

Depth(s) Groundwater Encountered 1. _____ 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.