

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: <u>Sumner</u>		<u>NW 1/4 NE 1/4 SE 1/4</u>	<u>5</u>	<u>T 30 S</u>	<u>R 1 E</u>		
Distance and direction from nearest town or city? <u>119th St & Broadway, Dec, Kansas 1/2 S of 119th St. Job/ Estate Lane</u>			Sheet address of well, if located within city? <u>Spec. House</u>				
2 WATER WELL OWNER: <u>Jerry Crow</u>			Board of Agriculture, Division of Water Resources				
RR#, St. Address, Box #: <u>Rt 1, Rose Hill, Kansas</u>			Application Number:				
3 DEPTH OF COMPLETED WELL: <u>40</u> ft. Bore Hole Diameter: <u>11</u> in. to in. to ft.							
Well Water to be used as:							
1 <u>Domestic</u> 3 Feedlot		5 Public water supply		8 Air conditioning			
2 Irrigation 4 Industrial		6 Oil field water supply		9 Dewatering			
		7 Lawn and garden only		10 Observation well			
Well's static water level: <u>15</u> ft. below land surface measured on		<u>10</u> month		<u>29</u> day <u>1979</u> 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 <u>RMP (SR)</u>		5 Wrought iron			
2 PVC		4 ABS		6 Asbestos-Cement			
		7 Fiberglass		8 Concrete tile			
				9 Other (specify below)			
Blank casing dia: <u>5</u> in. to <u>25</u> ft., Dia		<u>12</u> in., weight		Casing Joints: Glued <u>X</u> Clamped			
				Welded			
				Threaded			
Casing height above land surface: <u>12</u> in., weight				lbs./ft. Wall thickness or gauge No. <u>200</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel		5 Fiberglass			
2 Brass		4 Galvanized steel		6 Concrete tile			
				7 PVC			
				8 <u>RMP (SR)</u>			
				9 ABS			
				10 Asbestos-cement			
				11 Other (specify)			
				12 None used (open hole)			
Screen or Perforation Openings Are:							
1 Continuous slot		3 Mill slot		5 Gauzed wrapped			
2 Louvered shutter		4 Key punched		6 Wire wrapped			
				7 Torch cut			
				8 <u>Saw cut</u> <u>.06</u>			
				9 Drilled holes			
				10 Other (specify)			
Screen-Perforation Dia: <u>5</u> in. to <u>40</u> ft., Dia		<u>25</u> ft. to <u>40</u> 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.							
5 GROUT MATERIAL:							
1 Neat cement		2 <u>Cement grout</u>		3 Bentonite			
4 Other							
Grouted Intervals: From ft. to ft., From ft. to ft.							
What is the nearest source of possible contamination: <u>NONE</u>							
1 Septic tank		4 Cess pool		7 Sewage lagoon			
2 Sewer lines		5 Seepage pit		8 Feed yard			
3 Lateral lines		6 Pit privy		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 How many feet ? Water Well Disinfected? Yes <u>X</u> No							
Was a chemical/bacteriological sample submitted to Department? Yes No <u>X</u> If yes, date sample was submitted month day year: Pump Installed? Yes No <u>X</u>							
If Yes: Pump Manufacturer's name: <u>Pump not installed at this time</u> Model 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 (1) <u>constructed</u> (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. <u>236</u>							
This Water Well Record was completed on month day year under the business name of <u>Harp Well & Pump Service</u> by (signature) <u>Mr. Arnold</u>							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	3	Topsoil			
		3	13	Clay			
		13	22	Fine Sand			
		22	24	Clay			
		24	40	Medium Sand			
ELEVATION:							
Depth(s) Groundwater Encountered 1. . . <u>15</u> 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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EW

SEC

NW 1/4 SE 1/4