

1 LOCATION OF WATER WELL
 County: SUMNER Fraction: SW 1/4 SW 1/4 SW 1/4 Section Number: 10 Township Number: T 30 S Range Number: R 1 E EW

Distance and direction from nearest town or city? 1 1/2 S 05 1/2 South East of Helyatic Street address of well if located within city? #34 Greenfield Add., Peck, Ks.

2 WATER WELL OWNER: Don Nichelson Spec. House
 RR#, St. Address, Box # : _____ Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Peck, Ks. Application Number: _____

3 DEPTH OF COMPLETED WELL 40 ft. Bore Hole Diameter 1.1 in. to _____ ft., and _____ in. to _____ ft.
 Well Water to be used as:
1 Domestic 3 Feedlot 6 Oil field water supply 8 Air conditioning 11 Injection well
2 Irrigation 4 Industrial 7 Lawn and garden only 9 Dewatering 12 Other (Specify below)
Spec. House
 Well's static water level 17 ft. below land surface measured on 11 month 8 day 80 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:
3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: X Glued _____ Clamped _____
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
7 Fiberglass Threaded _____
 Blank casing dia 5 in. to 2.0 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:
7 PVC 10 Asbestos-cement
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
 Screen or Perforation Openings Are:
5 Gauzed wrapped 8 Saw cut .06 11 None (open hole)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)
 Screen-Perforation Dia 5 in. to 4.0 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 2.0 ft. to 4.0 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 1.4 ft. to 4.0 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 4.0 ft. to 1.4 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 Southwest How many feet 75 ? Water Well Disinfected? Yes X No _____
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No X
 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 (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 Serv., 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	2	Topsoil			
2	14	Clay			
14	17	Sandy Clay			
17	20	Fine Sand			
20	28	Fine to Medium Sand			
28	40	Blue Shale			

ELEVATION: _____

Depth(s) Groundwater Encountered 1.17 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
 T 30
 H 1
 EW
 SEC 10
 SW 1/4
 SW 1/4
 SW 1/4
 SW 1/4