

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>SUMNER</u>	<u>NE 1/4 NE 1/4 NW 1/4</u>	<u>11</u>	<u>T 31 S</u>	<u>R 1 E EW</u>

Distance and direction from nearest town or city? 1 S., of 119th, 1/2 E. of Hydraulic on S. side of Rd., Belle Plaine, Ks. Street address of well if located within city?

2 WATER WELL OWNER: Jack Flagler
 RR#, St. Address, Box # :
 City, State, ZIP Code : Belle Plaine, Ks. Board of Agriculture, Division of Water Resources
 Application Number:

3 DEPTH OF COMPLETED WELL: 42 ft. Bore Hole Diameter: 11 in. to ft., and in. to ft.

Well Water to be used as:

<u>5</u> Public water supply	<u>8</u> Air conditioning	<u>11</u> Injection well
<u>1</u> Domestic	<u>3</u> Feedlot	<u>6</u> Oil field water supply
<u>2</u> Irrigation	<u>4</u> Industrial	<u>7</u> Lawn and garden only
<u>9</u> Dewatering	<u>10</u> Observation well	<u>12</u> Other (Specify below)

Well's static water level 15 ft. below land surface measured on 9 month 17 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:

<u>1</u> Steel	<u>3</u> RMP (SR)	<u>5</u> Wrought iron	<u>8</u> Concrete tile	Casing Joints: <u>X</u> Glued Clamped
<u>2</u> PVC	<u>4</u> ABS	<u>6</u> Asbestos-Cement	<u>9</u> Other (specify below)	Welded
		<u>7</u> Fiberglass		Threaded

Blank casing dia 5 in. to 32 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:

<u>1</u> Steel	<u>3</u> Stainless steel	<u>5</u> Fiberglass	<u>7</u> PVC	<u>10</u> Asbestos-cement
<u>2</u> Brass	<u>4</u> Galvanized steel	<u>6</u> Concrete tile	<u>8</u> RMP (SR)	<u>11</u> Other (specify)
			<u>9</u> ABS	<u>12</u> None used (open hole)

Screen or Perforation Openings Are:

<u>1</u> Continuous slot	<u>3</u> Mill slot	<u>5</u> Gauzed wrapped	<u>8</u> Saw cut	<u>11</u> None (open hole)
<u>2</u> Louvered shutter	<u>4</u> Key punched	<u>6</u> Wire wrapped	<u>9</u> Drilled holes	
		<u>7</u> Torch cut	<u>10</u> Other (specify)	

Screen-Perforation Dia. 5 in. to 42 ft., Dia in. to ft., Dia in. to ft.

Screen-Perforated Intervals: From 32 ft. to 42 ft., From ft. to ft., From ft. to ft.

Gravel Pack Intervals: From 14 ft. to 42 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" ft. to 14 ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination:

<u>1</u> Septic tank	<u>4</u> Cess pool	<u>7</u> Sewage lagoon	<u>10</u> Fuel storage	<u>14</u> Abandoned water well
<u>2</u> Sewer lines	<u>5</u> Seepage pit	<u>8</u> Feed yard	<u>11</u> Fertilizer storage	<u>15</u> Oil well/Gas well
<u>3</u> Lateral lines	<u>6</u> Pit privy	<u>9</u> Livestock pens	<u>12</u> Insecticide storage	<u>16</u> Other (specify below)
			<u>13</u> Watertight sewer lines	

Direction from well East How many feet 7.5 ? 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 9 month 17 day 80 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 10 month 31 day 1980 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	10	Clay			
	10	35	Fine Sand			
	35	42	Grey Shale			

ELEVATION: Depth(s) Groundwater Encountered 1. 15 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.

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