

|                          |                             |                |                 |                |
|--------------------------|-----------------------------|----------------|-----------------|----------------|
| 1 LOCATION OF WATER WELL | Fraction                    | Section Number | Township Number | Range Number   |
| County: <u>Ellis</u>     | <u>WC 1/4 NW 1/4 NW 1/4</u> | <u>33</u>      | <u>T 13 S</u>   | <u>R 18 EW</u> |

Distance and direction from nearest town or city? in Hays Street address of well if located within city? 514 W 20th

2 WATER WELL OWNER: Hugh Cook  
 RR#, St. Address, Box #: 514 W 20th St  
 City, State, ZIP Code: Hays, Ka 67601  
 Board of Agriculture, Division of Water Resources  
 Application Number:

3 DEPTH OF COMPLETED WELL: 54 ft. Bore Hole Diameter: 10 in. to \_\_\_\_\_ ft., and \_\_\_\_\_ in. to \_\_\_\_\_ ft.

Well Water to be used as:

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

Well's static water level: 32 ft. below land surface measured on Oct month 7 day '81 year

Pump Test Data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping. \_\_\_\_\_ gpm

Est. Yield 15 gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping. 15 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      | <u>Styrene SDR 26</u>   | Threaded _____                           |

Blank casing dia: 5 in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.

Casing height above land surface: 18 in., weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No. SDR 26

TYPE OF SCREEN OR PERFORATION MATERIAL:

|         |                    |                 |            |  |
|---------|--------------------|-----------------|------------|--|
| 1 Steel | 3 Stainless steel  | 5 Fiberglass    | 8 RMP (SR) | 10 Asbestos-cement                       |
| 2 Brass | 4 Galvanized steel | 6 Concrete tile | 9 ABS      | 11 Other (specify) <u>Styrene SDR 26</u> |
|         |                    |                 |            | 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) <u>Styrene SDR 26</u> |                     |

Screen-Perforation Dia: 5 in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.

Screen-Perforated Intervals: From 34 ft. to 54 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Gravel Pack Intervals: From 30 ft. to 54 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 6 ft. to 18 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: West How many feet: 20 ? Water Well Disinfected? Yes No

Was a chemical/bacteriological sample submitted to Department? Yes No If yes, date sample \_\_\_\_\_ 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 1 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on Oct month 7 day 1981 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 Oct month 7 day 1981 year under the business name of Luce Water Well Drilling by (signature) John Luce

| LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | FROM | TO | LITHOLOGIC LOG                    | FROM | TO | LITHOLOGIC LOG |
|--|------|----|-----------------------------------|------|----|----------------|
|  | 0    | 10 |                                   | T.S. |    |                |
| 10   | 35   |    | B clay                            |      |    |                |
| 35   | 53   |    | F. S. sand w/ B clay + C. S. sand |      |    |                |
| 53   | 54   |    | Dark Blue Shale                   |      |    |                |

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 Contractor, Topeka, KS 66602. Send one to WATER WELL OWNER.

OFFICE USE ONLY

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