

116 W 4th
WATER WELL OWNER: MARGARET SCHNEIDER
RR#, St. Address, Box # : 116 W 4th
City, State, ZIP Code : ELLINWOOD KS 67526

Board of Agriculture, Division of Water Resources
Application Number: NONE

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 25 ft. below land surface measured on mo/day/yr _____

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter _____ in. to _____ ft., and _____ in. to _____ ft.

WELL WATER TO BE USED AS:

1 Domestic	3 Feedlot	6 Oil field water supply	9 Dewatering	12 Other (Specify below)
2 Irrigation	4 Industrial	7 Lawn and garden only	10 Observation well	

Was a chemical/bacteriological sample submitted to Department? Yes _____ No ☒; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes ☒ No _____

5] TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued Clamped
<u>Steel</u>	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
2 PVC	4 ABS	7 Fiberglass	Welded
			<u>Threaded</u>

Blank casing diameter 1 1/2 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
Casing height above land surface 0 in. weight _____ 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) <i>N.A.</i>
			9 ABS	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) <i>NA</i>	

SCREEN-PERFORATED INTERVALS:	From ft. to ft.,	From ft. to ft.
	From ft. to ft.,	From ft. to ft.
GRAVEL PACK INTERVALS:	From ft. to ft.,	From ft. to ft.
	From ft. to ft.,	From ft. to ft.

6] GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
Grout Intervals: From 25 ft. to 0 ft. From ft. to ft. From ft. to ft.

What is the nearest source of possible contamination:				10 Livestock pens	14 Abandoned water well
1 Septic tank	4 Lateral lines	7 Pit privy	11 Fuel storage	15 Oil well/Gas well	
2 Sewer lines	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	16 Other (specify below)	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage	NONE	

Direction from well? _____ How many feet? _____

[illegible]

7. CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 9-11-90 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 (mo/day/yr) 9-19-90 under the business name of by (signature) Kelly Str...

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, Bureau of Water Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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E/M

SEC

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