

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Harey</u>		<u>NE</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$	<u>22</u>	T <u>22</u> S	R <u>2</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>5 mile West of Hesston</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # :		Application Number: <u>4793</u>			
City, State, ZIP Code :		<u>Independence, KS 67107</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>112</u> ft. ELEVATION: _____			
		Depth(s) Groundwater Encountered 1. <u>75</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>16</u> ft. below land surface measured on mo/day/yr <u>10-6-88</u>			
		Pump test data: Well water was <u>29</u> ft. after <u>3</u> hours pumping <u>30</u> gpm			
		Est. Yield <u>50-70</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>12</u> in. to <u>112</u> 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    9 Dewatering    12 Other (Specify below) 2 Irrigation    4 Industrial    7 Lawn and garden only    10 Observation well <u>13. Fish Pond</u>			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes <u>X</u> No _____			
5 TYPE OF BLANK CASING USED:					
1 Steel    3 RMP (SR)    5 Wrought iron    8 Concrete tile    CASING JOINTS: Glued <u>X</u> Clamped _____ 2 <u>PVC</u> 4 ABS    6 Asbestos-Cement    9 Other (specify below)    Welded _____ 7 Fiberglass    Threaded _____					
Blank casing diameter <u>6</u> in. to <u>92</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface <u>24</u> in., weight <u>3.35</u> lbs./ft. Wall thickness or gauge No. <u>225</u>					
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) _____ 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot    3 Mill slot    5 Gauzed wrapped <u>factory</u> 8 Saw cut <u>1030</u> 11 None (open hole) 2 Louvered shutter    4 Key punched    6 Wire wrapped    9 Drilled holes 7 Torch cut    10 Other (specify) _____					
SCREEN-PERFORATED INTERVALS: From <u>92'</u> ft. to <u>112'</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>112'</u> ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement    2 Cement grout    3 <u>Bentonite</u> 4 Other _____ Grout Intervals: From <u>0</u> ft. to <u>20</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank    4 Lateral lines    7 Pit privy    10 Livestock pens    14 Abandoned water well 2 Sewer lines    5 Cess pool    8 Sewage lagoon    11 Fuel storage    15 Oil well/Gas well 3 Watertight sewer lines    6 Seepage pit    9 Feedyard    12 Fertilizer storage    16 Other (specify below) 13 Insecticide storage <u>fish pond</u>					
Direction from well? <u>South</u> How many feet? <u>35'</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	5	loam			
5	10	br to red br clay			
10	25	red br clay			
25	31	light br clay (some fine sand)			
31	36	gray clay			
36	51	sand - med.			
51	71	red brown clay			
71	75	gray clay			
75	112	sand med. to coarse			
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) <u>10-10-88</u> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <u>452</u> This Water Well Record was completed on (mo/day/yr) <u>11-8-88</u>					
under the business name of <u>United Water Well &amp; Pump</u> by (signature) <u>Paul Bunkert</u>					
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.					

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