

1 LOCATION OF WATER WELL		Fraction	Near Center of		Section Number	Township Number		Range Number	
County: <u>Harvey</u>		<u>1/4</u>	<u>1/4</u>	<u>SE</u>	<u>4</u>	<u>T</u>	<u>22</u>	<u>S</u>	<u>R</u> <u>3</u> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">NW</span>
Distance and direction from nearest town or city? <u>9 miles North &amp; 3/4 mil. East of Burrton, KS</u>					Street address of well if located within city?				
2 WATER WELL OWNER: <u>Phil Schmidt</u>					Board of Agriculture, Division of Water Resources				
RR#, St. Address, Box #: <u>Route 1 - Box 46</u>					Application Number: <u>Not Available</u>				
City, State, ZIP Code: <u>Buhler, KS 67522</u>									
3 DEPTH OF COMPLETED WELL: <u>140</u> ft. Bore Hole Diameter: <u>24</u> in. to <u>140</u> ft., and _____ in. to _____ ft.									
Well Water to be used as:									
1 Domestic		3 Feedlot		5 Public water supply		8 Air conditioning		11 Injection well	
2 Irrigation		4 Industrial		6 Oil field water supply		9 Dewatering		12 Other (Specify below)	
				7 Lawn and garden only		10 Observation well			
Well's static water level: <u>39</u> ft. below land surface measured on <u>5</u> month <u>5</u> day <u>1980</u> year									
Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm									
Est. Yield <u>Not Ck'd</u> gpm: Well water was _____ ft. after _____ hours pumping _____ 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 <u>X</u>	
				7 Fiberglass				Threaded _____	
Blank casing dia: <u>16</u> in. to <u>60</u> ft., Dia: <u>16</u> in. to <u>100</u> ft., Dia: _____ in. to _____ ft.									
Casing height above land surface: <u>12</u> in., weight: <u>31.75</u> lbs./ft. Wall thickness or gauge No. <u>188</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		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>Doerr Bridge Slot</u>			
Screen-Perforation Dia: <u>16</u> in. to <u>80</u> ft., Dia: <u>16</u> in. to <u>140</u> ft., Dia: _____ in. to _____ ft.									
Screen-Perforated Intervals: From <u>60</u> ft. to <u>80</u> ft., From _____ ft. to _____ ft.									
From <u>100</u> ft. to <u>140</u> ft., From _____ ft. to _____ ft.									
Gravel Pack Intervals: From <u>40</u> ft. to <u>140</u> ft., From _____ ft. to _____ ft.									
Annular Fill From <u>10</u> ft. to <u>40</u> ft., From _____ ft. to _____ ft.									
5 GROUT MATERIAL:									
1 Neat cement		2 Cement grout		3 Bentonite		4 Other _____			
Grouted Intervals: From <u>0</u> ft. to <u>10</u> 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) <u>FIELD</u>	
Direction from well: <u>n/a</u> How many feet: <u>n/a</u> Water Well Disinfected? Yes _____ No <u>X</u>									
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, date sample _____									
was submitted _____ month _____ day _____ year: Pump Installed? Yes <u>X</u> No _____									
If Yes: Pump Manufacturer's name: <u>Peerless Pump Co.</u> Model No. <u>12LD-3</u> HP <u>80</u> Volts _____									
Depth of Pump Intake: <u>110'</u> ft. Pumps Capacity rated at <u>950</u> 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) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on <u>5</u> month <u>5</u> day <u>1980</u> year									
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>185</u>									
This Water Well Record was completed on <u>5</u> month <u>14</u> day <u>1980</u> year under the business name of <u>Clarke Well &amp; Eq., Inc.</u> by (signature) <u>[Signature]</u>									
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:									
		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG		
		0	4	Top soil	97	103	Fine sand & gravel w/ thin green clay streaks		
		4	18	Brown & tan clay					
		18	26	Tan clay w/caliche strks	103	109	Fine sand w/thick strks tan clay		
		26	48	Tan clay					
		48	51	Sand & tan sandy clay	109	115	Sand & gravel w/thin clay streaks		
		51	66	Fine-Med. Sand & gravel w/stks tan clay	115	116	Tan clay w/streaks of sand & gravel		
		66	80	Sand & gravel w/green clay	116	127	Fine-Very fine sand & gravel		
		80	87	Tan clay					
		87	91	Fine sand & tan clay					
ELEVATION: UNKNOWN		91	97	Gray & tan clay	127	140	Sand & gravel w/clay strks		
Depth(s) Groundwater Encountered 1. <u>39</u> 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.									