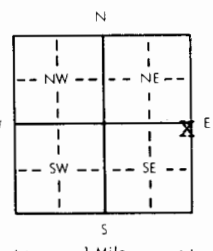
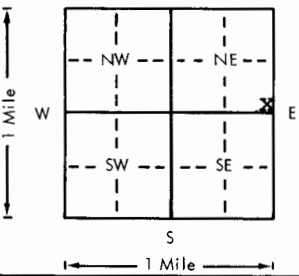


1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: Harvey		NCO <input checked="" type="checkbox"/> E side <input checked="" type="checkbox"/> E 1/2 <input checked="" type="checkbox"/> W	20	T 22 S	R 3 <input checked="" type="checkbox"/> W		
Distance and direction from nearest town or city? 6 1/2 miles north of Burrton			Street address of well if located within city?				
2 WATER WELL OWNER: Equus Beds Groundwater Management District #2							
RR#, St. Address, Box # : 243 Main			Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : Halstead, Kansas 67056			Application Number:				
3 DEPTH OF COMPLETED WELL 50 ft. Bore Hole Diameter 4.0 in. to 50 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			
Well's static water level 13.20 ft. below land surface measured on 1 month day 81 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:							
1 Steel		3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded		
2 PVC		4 ABS	7 Fiberglass		Threaded		
Blank casing dia 2.0 in. to 47 ft. Dia in. to ft. Dia in. to ft.							
Casing height above land surface in., weight lbs./ft. Wall thickness or gauge No							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement Johnson Red-		
2 Brass		4 Galvanized steel	6 Concrete tile	9 ABS	11 Other (specify) head Wellpoint		
					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)			
Screen-Perforation Dia 1.25 in. to ft. Dia in. to ft. Dia in. to ft.							
Screen-Perforated Intervals: From 47 ft. to 50 ft. From ft. to ft.							
Gravel Pack Intervals: From ft. to ft. From ft. to ft.							
5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grouted Intervals: From 0 ft. to 5 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 How many feet ? Water Well Disinfected? Yes No <input checked="" type="checkbox"/>							
Was a chemical/bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/> If yes, date sample was submitted month day year: Pump Installed? Yes No <input checked="" type="checkbox"/>							
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 8 month 23 day 79 year							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. Wichita Water Dept.							
This Water Well Record was completed on 10 month 12 day 81 year under the business name of Equus Beds GMD #2 by (signature)							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	4	Top soil			
		4	35	Clay-brown to gray			
		35	40	Sand & gravel-gray			
		40	50	Sand & gravel-white			
							EB - 29A
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 Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.							

USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:		County Harvey	Fraction SE 1/4 SE 1/4 NE 1/4	Section number 20	Township number T 22 S R 3	Range number EW
2. Distance and direction from nearest town or city: 6 1/2 mi. north of Burrton Street address of well location if in city:				3. Owner of well: Equus Beds GMD #2 R.R. or street: 243 Main City, state, zip code: Halstead, Ks. 67056		
4. Locate with "X" in section below: Sketch map: 				6. Bore hole dia. 4 in. Completion date 8/23/79 Well depth 48 ft.		
5. Type and color of material				7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
				8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input checked="" type="checkbox"/> Other		
				9. Casing: Material <input type="checkbox"/> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 24 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 2 in. to 45 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. Sch 40		
				10. Screen: Manufacturer's name Johnson Type wellpoint Dia. 1.25 in. Slot/gauze 10 Length 36 Set between 45 ft. and 48 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? no Size range of material <input type="checkbox"/>		
				11. Static water level: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> ft. below land surface Date <input type="checkbox"/>		
(Use a second sheet if needed)				12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.		
				13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
				14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		
				15. Well grouted? yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 5 ft.		
				16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(Use a second sheet if needed)				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
				18. Elevation:		
				19. Remarks: EB-29A		
				20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Equus Beds GMD #2 Business name <input type="checkbox"/> License No. <input type="checkbox"/> Address 243 Main, Halstead, Ks. Signed Thomas C. Sell Date 12/1/79 Authorized representative		
				Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		