

2	WATER WELL OWNER:	H-30	
	RR#, St. Address, Box # :	251 N. Water, Suite 10	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code :	Wichita, Kansas 67202	Application Number: Unknown

4 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile Casing Joints: Glued Clamped
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded
2 PVC 4 ABS 7 Fiberglass Threaded
Blank casing dia 5 in. to 110 ft., Dia in. to ft., Dia in. to ft.
Casing height above land surface 12 in., weight 2.8 lbs./ft. Wall thickness or gauge No Sch. 40

5 GROUT MATERIAL:		1 Neat cement	2 Cement grout	3 <u>Bentonite</u>	4 Other
Grouted Intervals: From		0	ft. to	10	ft., From
What is the nearest source of possible contamination:		10 Fuel storage			
1 Septic tank	4 Cess pool	7 Sewage lagoon	11 Fertilizer storage	14 Abandoned water well	
2 Sewer lines	5 Seepage pit	8 Feed yard	12 Insecticide storage	15 <u>Oil well/Gas well</u>	
3 Lateral lines	6 Pit privy	9 Livestock pens	13 Watertight sewer lines	16 Other (specify below)	
Direction from well	S	How many feet	60	? Water Well Disinfected? Yes	<u>No</u>
Was a chemical/bacteriological sample submitted to Department? Yes		<u>No</u>		If yes, date sample	
was submitted		month	day	year: Pump Installed? Yes	<u>No</u>
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

[illegible]

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.