

1 LOCATION OF WATER WELL		Fraction	NCO east side		Section Number	Township Number		Range Number	
County: <u>Harvey</u>		$\frac{1}{4}$	$\frac{1}{4}$	<u>E/2</u> $\frac{1}{4}$	32	T	22	S	R 3 <u>EW</u>
Distance and direction from nearest town or city? <u>4 1/2 miles north of Burrton</u>					Street address of well if located within city?				
2 WATER WELL OWNER: <u>Equus Beds GMD #2</u>									
RR#, St. Address, Box # : <u>243 Main</u>					Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : <u>Halstead, Kansas 67056</u>					Application Number:				
3 DEPTH OF COMPLETED WELL... <u>128</u> ...ft. Bore Hole Diameter... <u>4.0</u> ...in. to... <u>135</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>15.86</u> ...ft. below land surface measured on... <u>3</u> ...month... <u>26</u> ...day... <u>82</u> ...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)		5 Wrought iron		8 Concrete tile		Casing Joints: Glued <u>X</u> Clamped	
2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)		Welded	
				7 Fiberglass				Threaded	
Blank casing dia... <u>2.0</u> ...in. to... <u>125</u> ...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		7 PVC		10 Asbestos-cement <u>Johnson Redhead</u>	
2 Brass		4 Galvanized steel		6 Concrete tile		8 RMP (SR)		11 Other (specify) <u>Wellpoint</u>	
						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)			
Screen-Perforation Dia... <u>1.25</u> ...in. to... ..ft., Dia... ..in. to... ..ft., Dia... ..in. to... ..ft.									
Screen-Perforated Intervals: From... ..ft. to... <u>125</u> ...ft., From... ..ft. to... <u>128</u> ...ft., From... ..ft. to... ..ft.									
Gravel Pack Intervals: From... ..ft. to... ..ft., From... ..ft. to... ..ft., From... ..ft. to... ..ft.									
5 GROUT MATERIAL: <u>1 Neat cement</u> 2 Cement grout 3 Bentonite 4 Other									
Grouted Intervals: From... <u>0</u> ...ft. to... <u>5</u> ...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 <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... .. No <u>X</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									
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... ..7... ..month... ..22... ..day... ..81... ..year, and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>Wichita Water Dept.</u> This Water Well Record was completed on... ..10... ..month... ..21... ..day... ..81... ..year under the business name of <u>Equus Beds GMD #2</u> by (signature)									
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHOLOGIC LOG	
		0	3	top soil					
		3	48	Clay - tan, red, gray					
		48	60	Fine sand to gravel - gray					
		60	66	Clay - brown, tan					
		66	82	Sand & Gravel - yellow, white					
		82	114	Clay - gray					
		114	128	Sand & Gravel - white				EB-23B	
		128	135	Clay - tan					
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.									