

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: HARVEY		NW 1/4 NW 1/4 NW 1/4	24	T 23 S	R 1 EW
Distance and direction from nearest town or city? 1/2 WEST of Newton			Street address of well if located within city? Lot #4 - block 3 Moorlones West ADD		

2 WATER WELL OWNER: Peter Norfeldt		Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #: Box 88		Application Number:
City, State, ZIP Code: Newton KS 67114		

3 DEPTH OF COMPLETED WELL: 48 ft. Bore Hole Diameter: 11 in. to . . . ft., and . . . in. to . . . ft.	
Well Water to be used as:	5 Public water supply 8 Air conditioning 11 Injection well <input checked="" type="radio"/> 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: 23 ft. below land surface measured on . . . month 30 day 81 year	
Pump Test Data: Well water was: 32 ft. after 3 hours pumping. 20 gpm	
Est. Yield: 20 gpm: Well water was . . . ft. after . . . hours pumping. . . gpm	

4 TYPE OF BLANK CASING USED:		5 Wrought iron	8 Concrete tile	Casing Joints: Glued <input checked="" type="checkbox"/> Clamped . . .
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded . . .
<input checked="" type="radio"/> 2 PVC	4 ABS	7 Fiberglass		Threaded . . .
Blank casing dia: 5 in. to 48 ft. Dia . . . in. to . . . ft. Dia . . . in. to . . . ft.				
Casing height above land surface: 18 in., weight: 2.37 lbs./ft. Wall thickness or gauge No: 214				
TYPE OF SCREEN OR PERFORATION MATERIAL:		<input checked="" type="radio"/> 7 PVC	10 Asbestos-cement	
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)
Screen or Perforation Openings Are:		5 Gauzed wrapped 1030	<input checked="" type="radio"/> 8 Saw cut factory	11 None (open hole)
1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes	
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify)	
Screen-Perforation Dia: 5 in. to 42 ft. Dia . . . in. to . . . ft. Dia . . . in. to . . . ft.				
Screen-Perforated Intervals: From 27 ft. to 42 ft. From . . . ft. to . . . ft. From . . . ft. to . . . ft.				
Gravel Pack Intervals: From 10 ft. to 48 ft. From . . . ft. to . . . ft. From . . . ft. to . . . ft.				

5 GROUT MATERIAL:		1 Neat cement	2 Cement grout	<input checked="" type="radio"/> 3 Bentonite	4 Other
Grouted Intervals: From 0 ft. to 10 ft. From . . . ft. to . . . ft. From . . . ft. to . . . ft.					
What is the nearest source of possible contamination:		10 Fuel storage	14 Abandoned water well		
<input checked="" type="radio"/> 2 Sewer lines	4 Cess pool	7 Sewage lagoon	11 Fertilizer storage	15 Oil well/Gas well	
3 Lateral lines	5 Seepage pit	8 Feed yard	12 Insecticide storage	16 Other (specify below)	
	6 Pit privy	9 Livestock pens	13 Watertight sewer lines		
Direction from well: North How many feet: 62' ? Water Well Disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, date sample was submitted . . . month . . . day . . . year: Pump Installed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
If Yes: Pump Manufacturer's name: Dempster Model No: HBC-50-52 HP 1/2 Volts: 230					
Depth of Pump Intake: 40 ft. Pumps Capacity rated at: 18 gal./min.					
Type of pump: <input checked="" type="radio"/> 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 . . . month 24 day 81 year	
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 175	
This Water Well Record was completed on . . . month 9 day 10 year 81 under the business name of PAUL'S INC by (signature) Paul Norfeldt	

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	5	LOAM			
	5	16	" to red-br clay			
	16	20	SANDY GRV CLAY			
	20	28	br. clay			
	28	38	CLAY & SAND (MED) LAYERED			
	38	40	green-rusty shale			
	40	42	coarse sand			
	42	48	grey shale to DARK			

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.