

<b>1 LOCATION OF WATER WELL:</b>		Fraction	Section Number	Township Number	Range Number
County: HARVEY	NE ¼ SE ¼ NE ¼	12	T 23 S	R 2W /d/W	
Distance and direction from nearest town or city street address of well if located within city? 3 West, 2½ No. of Twin Bridges, Halstead, Kansas					
<b>2 WATER WELL OWNER:</b>		Betty Graham			
RR#, St. Address, Box # :		Box 18578	Board of Agriculture, Division of Water Resources		
City, State, ZIP Code :		Wichita, Kansas	Application Number:		
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>	<b>4 DEPTH OF COMPLETED WELL:</b> 70 ft. ELEVATION:				
	Depth(s) Groundwater Encountered 1. 15 ft. 2. . ft. 3. . ft.				
	WELL'S STATIC WATER LEVEL 15 ft. below land surface measured on mo/day/yr 4-19-83				
	Pump test data: Well water was . ft. after . hours pumping . gpm				
	Est. Yield . gpm: Well water was . ft. after . hours pumping . gpm				
	Bore Hole Diameter . 30 in. to . 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					
Was a chemical/bacteriological sample submitted to Department? Yes.....No..... <u>X</u> ; If yes, mo/day/yr sample was submitted					
Water Well Disinfected? Yes <u>XX</u> No					
<b>5 TYPE OF BLANK CASING USED:</b>					
1 Steel                  3 RMP (SR)                  6 Asbestos-Cement                  9 Other (specify below)                  Welded 2 PVC                  4 ABS                  7 Fiberglass                  Threaded					
Blank casing diameter . 16 in. to . 30 in. Dia . in. to . ft., Dia . in. to . ft.					
Casing height above land surface . 12 in., weight . 37 lbs./ft. Wall thickness or gauge No. . 3/4"					
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>					
1 Steel                  3 Stainless steel                  5 Fiberglass                  8 RMP (SR)                  10 Asbestos-cement                  Transite 2 Brass                  4 Galvanized steel                  6 Concrete tile                  9 ABS                  11 Other (specify) 12 None used (open hole)					
<b>SCREEN OR PERFORATION OPENINGS ARE:</b>					
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)					
<b>SCREEN-PERFORATED INTERVALS:</b> From . 30 ft. to . 70 ft., From . ft. to . ft.					
GRAVEL PACK INTERVALS: From . 14 ft. to . 70 ft., From . ft. to . ft.					
<b>6 GROUT MATERIAL:</b> 1 Neat cement      2 Cement grout      3 Bentonite      4 Other					
Grout Intervals: From . 0 ft. to . 10 ft., From . ft. to . ft., From . ft. to . ft.					
What is the nearest source of possible contamination:					
1 Septic tank                  4 Lateral lines                  7 Pit privy                  10 Livestock pens                  14 Abandoned water well 2 Sewer lines                  5 Cess pool                  8 Sewage lagoon                  11 Fuel storage                  15 Oil well/Gas well 3 Watertight sewer lines    6 Seepage pit                  9 Feedyard                  12 Fertilizer storage                  16 Other (specify below) 13 Insecticide storage					
Direction from well? Northeast      How many feet? 1000					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	20	Clay 01			
20	29	Fine Sand with Clay 04			
29	42	Fine to Coarse Sand 05			
42	70	Clay with fome fine sand 04			
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 4-19-83 and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. 236 This Water Well Record was completed on (mo/day/yr) 6-6-83					
under the business name of Harp Well & Pump Service, Inc. by (signature) M. Arnold					
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, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					