

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Harvey</u>		<u>NW 1/4 NW 1/4 NE 1/4</u>	<u>33</u>	<u>T 23 S</u>	<u>R 2 EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1 1/2 mi. W of Halstead</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # :		Application Number:			
City, State, ZIP Code :		<u>Halstead, KS 67076</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL... <u>88</u> ... ft. ELEVATION: .....			
		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.			
		WELL'S STATIC WATER LEVEL... <u>38</u> ... ft. below land surface measured on mo/day/yr <u>10-15-86</u> ...			
		Pump test data: Well water was <u>43</u> ... ft. after <u>1</u> ... hours pumping <u>25</u> ... gpm			
		Est. Yield <u>50</u> ... gpm: Well water was .... ft. after .... hours pumping .... gpm			
		Bore Hole Diameter... <u>10</u> ... in. to <u>9 1/4</u> ... 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			
Was a chemical/bacteriological sample submitted to Department? Yes.....No... <input checked="" type="checkbox"/> .....; If yes, mo/day/yr sample was submitted		Water Well Disinfected? Yes <input checked="" type="checkbox"/> No			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped .....			
1 Steel    3 RMP (SR)		Welded .....			
<input checked="" type="radio"/> PVC    4 ABS		Threaded .....			
Blank casing diameter .... <u>6</u> ... in. to <u>7 1/2</u> ... ft., Dia .... in. to .... ft., Dia .... in. to .... ft.		5 Wrought iron    8 Concrete tile			
Casing height above land surface .... <u>12</u> ... in., weight .... <u>3.25</u> ... lbs./ft. Wall thickness or gauge No. <u>160</u>		6 Asbestos-Cement    9 Other (specify below)			
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 Fiberglass			
1 Steel    3 Stainless steel    5 Fiberglass    8 RMP (SR)		10 Asbestos-cement			
2 Brass    4 Galvanized steel    6 Concrete tile    9 ABS		11 Other (specify) .....			
SCREEN OR PERFORATION OPENINGS ARE:		12 None used (open hole)			
1 Continuous slot    3 Mill slot    5 Gauzed wrapped    8 Saw cut    11 None (open hole)		9 Drilled holes			
2 Louvered shutter    4 Key punched    7 Torch cut    10 Other (specify) .....					
SCREEN-PERFORATED INTERVALS: From .... <u>75</u> ... ft. to .... <u>88</u> ... ft., From .... ft. to .... ft.					
GRAVEL PACK INTERVALS: From .... <u>70</u> ... ft. to .... <u>90</u> ... ft., From .... ft. to .... ft.					
6 GROUT MATERIAL: <input checked="" type="radio"/> Neat cement    2 Cement grout    3 Bentonite    4 Other .....					
Grout Intervals: From .... <u>3</u> ... ft. to .... <u>13</u> ... ft., From .... ft. to .... ft., From .... ft. to .... ft.					
What is the nearest source of possible contamination:		10 Livestock pens    14 Abandoned water well			
<input checked="" type="radio"/> Septic tank    4 Lateral lines    7 Pit privy    11 Fuel storage    15 Oil well/Gas well		12 Fertilizer storage    16 Other (specify below)			
2 Sewer lines    5 Cess pool    8 Sewage lagoon    13 Insecticide storage					
3 Watertight sewer lines    6 Seepage pit    9 Feedyard					
Direction from well? <u>E</u>		How many feet? <u>200</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	46	Br Clay			
6	16	C Sand			
16	46	Gr Clay			
46	48	C Sand			
48	53	Gr Clay			
53	67	C Sand			
67	77	Br Clay			
77	84	Sand + Sm Gravel			
84	94	Br Clay			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="radio"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) .... <u>10-15-86</u> ... and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. .... <u>447</u> ... This Water Well Record was completed on (mo/day/yr) .... <u>12-28-87</u> ...					
under the business name of <u>Miller Drilling</u> by (signature) <u>Egan Miller</u>					
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, Bureau of Water Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.					