

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County Harvey		NE 1/4 SW 1/4 SW 1/4	35	T 23 S	R 2 E
Distance and direction from nearest town or city street address of well if located within city? see below					
2 WATER WELL OWNER: Sam Farmer					
RR#, St. Address, Box #: 570 West St.				Board of Agriculture, Division of Water Resources	
City, State, ZIP Code: Halstead, KS 67056				Application Number:	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 85 ft. ELEVATION: 7-29-03 ft.			
		Depth(s) Groundwater Encountered 1 ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL 35 ft. below land surface measured on mo/day/yr			
		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: 1 1/2 in. to 8 1/2 in. and _____ in. to _____ ft.			
		WELL WATER TO BE USED AS:			
		5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well			
		Was a chemical/bacteriological sample submitted to Department? Yes. _____ No. X If yes, mo/day/yr sample was submitted _____			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued. X Clamped. _____			
1 Steel 3 RMP (SR) 2 PVC 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)		Welded _____ Threaded _____			
Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		Casing height above land surface: 12 in., weight 2.40 lbs./ft. Wall thickness or gauge No. 160 psi			
TYPE OF SCREEN OR PERFORATION MATERIAL:		1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 8 RMP (SR) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:		1 Continuous slot 2 Mill slot 3 Gauzed wrapped 4 Wire wrapped 5 Saw cut 6 None (open hole) 2 Louvered shutter 4 Key punched 7 Torch cut 8 Drilled holes 9 Other (specify) _____ ft.			
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 3 Cement grout 5 Bentonite 4 Other _____					
Grout Intervals: From _____ ft. to _____ 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? north How many feet? 50					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	top soil			
3	41	clay			
41	44	gravel			
44	60	clay			
60	68	fine sand			
68	85	med sand			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 7-29-03 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. 318 This Water Well Record was completed on (mo/day/yr) 7-29-03 under the business name of Weninger Drilling Inc. by (signature) Michelle George					
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, Topeka, Kansas 66620-0001. Telephone 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.					