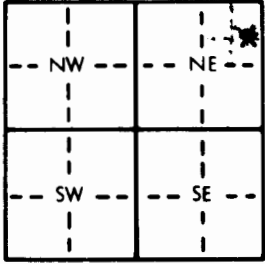


1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: HARVEY		SE 1/4 NE 1/4 NE 1/4	13	T 23 S	R 2 E
Distance and direction from nearest town or city street address of well if located within city? 6 miles West of NEWTON					

2 WATER WELL OWNER: BENNY FERREL		Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #: 300 ROLLING HILLS DR.		Application Number: 67114
City, State, ZIP Code: NEWTON KS		

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL: 67 ft. ELEVATION:	
	Depth(s) Groundwater Encountered 1. 53 ft. 2. 60 ft. 3. _____ ft.	
	WELL'S STATIC WATER LEVEL 30 ft. below land surface measured on mo/day/yr 8-27-81	
	Pump test data: Well water was 43 ft. after 2 hours pumping 20 gpm	
	Est. Yield 20 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm	
Bore Hole Diameter 11 in. to 67 ft., and _____ in. to _____ ft.		
WELL WATER TO BE USED AS:		
<input checked="" type="checkbox"/> 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) FOR RR IN FARM SHED <input type="checkbox"/> 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? <input checked="" type="checkbox"/> Yes No		

5 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)	
<input checked="" type="checkbox"/> 2 PVC		4 ABS		7 Fiberglass		Welded _____	
Blank casing diameter 5 in. to 47 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.						Threaded _____	
Casing height above land surface 18 in., weight 2.37 lbs./ft. Wall thickness or gauge No. 214							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel		5 Fiberglass		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		3 Mill slot		5 Gauzed wrapped .025		<input checked="" type="checkbox"/> 8 Saw cut Factory	
2 Louvered shutter		4 Key punched		6 Wire wrapped		9 Drilled holes	
				7 Torch cut		10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS: From 47 ft. to 67 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
GRAVEL PACK INTERVALS: From 10 ft. to 67 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							

6 GROUT MATERIAL:		1 Neat cement		2 Cement grout		<input checked="" type="checkbox"/> 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	
<input checked="" type="checkbox"/> 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? NE						How many feet? 10'			

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	5	LOAM to BR CLAY			
5	10	RD-BR CLAY			
10	21	GREY-BLUE CLAY			
21	35	RED-BR CLAY			
35	45	BR CLAY w/ ALK-CAL deposits			
45	53	BR CLAY-LAYERED white CAL Stone			
53	56	MED FINE SAND			
56	60	HARD BROWN CLAY			
60	66	SAND-MED-COARSE			
66	67	HARD WHITE CAL STONE			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 10-20-81 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 (mo/day/yr) 10-29-81 under the business name of PAUL'S INC by (signature) Paul Burchard	
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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.