

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Reno</u>		<u>NW 1/4 NE 1/4 NW 1/4</u>	<u>2</u>	T <u>23</u> S	R <u>5</u> E <u>ND</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1 1/2 m. E of Hutchinson - 5110 Bluestem</u>					
2 WATER WELL OWNER: <u>Gruver Construction</u>					
RR#, St. Address, Box # : <u>800 E 82nd</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Hutch, KS 67502</u>			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>113</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.			
		WELL'S STATIC WATER LEVEL <u>27</u> ft. below land surface measured on mo/day/yr <u>3-28-96</u>			
		Pump test data: Well water was <u>48</u> ft. after <u>2</u> hours pumping <u>20</u> gpm			
		Est. Yield .... gpm: Well water was .... ft. after .... hours pumping .... gpm			
		Bore Hole Diameter <u>9</u> in. to <u>121</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 Monitoring 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>X</u> No					
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded .....
<input checked="" type="radio"/> PVC		4 ABS	7 Fiberglass		Threaded .....
Blank casing diameter <u>5</u> in. to <u>93</u> ft., Dia .... in. to .... ft., Dia .... in. to .... ft.					
Casing height above land surface <u>12</u> in., weight <u>2.29</u> lbs./ft. Wall thickness or gauge No. <u>160</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL: <input checked="" type="radio"/> PVC					
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:					
1 Continuous slot		3 Mill slot	5 Gauzed wrapped	<input checked="" type="radio"/> Saw cut	11 None (open hole)
2 Louvered shutter		4 Key punched	6 Wire wrapped	9 Drilled holes	
			7 Torch cut	10 Other (specify) .....	
SCREEN-PERFORATED INTERVALS: From <u>93</u> ft. to <u>113</u> ft., From .... ft. to .... ft.					
From .... ft. to .... ft., From .... ft. to .... ft.					
GRAVEL PACK INTERVALS: From <u>23</u> ft. to <u>50</u> ft., From .... ft. to .... ft.					
From <u>55</u> ft. to <u>121</u> ft., From .... ft. to .... ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> Bentonite 4 Other .....					
Grout Intervals: From <u>3</u> ft. to <u>23</u> ft., From <u>50</u> ft. to <u>55</u> ft., From .... ft. to .... ft.					
What is the nearest source of possible contamination:					
<input checked="" type="radio"/> 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)
Direction from well? <u>SE</u>		How many feet? <u>105</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	37	F Sand - Sm layers clay			
37	69	Sandy br clay			
69	88	F Sand + layers clay			
88	93	br sandy clay			
93	116	F Sand			
116	121	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>3-28-96</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>4-2-96</u>					
under the business name of <u>Miller Drilling</u> by (signature) <u>B 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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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