

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: <u>Renov</u>		<u>SE 1/4 NW 1/4 NW 1/4</u>	<u>4</u>	<u>T 23 S</u>	<u>R 5 E</u>		
Distance and direction from nearest town or city?			Street address of well if located within city?				
			<u>2401 Howell Drive Hutchinson</u>				
2 WATER WELL OWNER: <u>Mike McNaul</u>							
RR#, St. Address, Box #: <u>2401 Howell Dr.</u>				Board of Agriculture, Division of Water Resources			
City, State, ZIP Code: <u>Hutchinson Kan. 67501</u>				Application Number:			
3 DEPTH OF COMPLETED WELL: <u>38</u> ft. Bore Hole Diameter: <u>9</u> in. to <u>38</u> ft., and _____ in. to _____ ft.							
Well Water to be used as:							
5 Public water supply		8 Air conditioning		11 Injection well			
9 Domestic		3 Feedlot		6 Oil field water supply			
2 Irrigation		4 Industrial		7 Lawn and garden only			
10 Observation well		9 Dewatering		12 Other (Specify below)			
Well's static water level: <u>27</u> ft. below land surface measured on _____ month <u>14</u> day <u>8.0</u> year							
Pump Test Data: Well water was <u>32</u> ft. after _____ hours pumping _____ gpm							
Est. Yield <u>10</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm							
4 TYPE OF BLANK CASING USED:							
1 Steel		3 RMP (SR)		5 Wrought iron			
2 PVC		4 ABS		6 Asbestos-Cement			
Blank casing dia <u>6</u> in. to <u>28</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		7 Fiberglass		9 Other (specify below)			
Casing height above land surface: <u>12</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>255</u>		8 Concrete tile		Casing Joints: Glued <u>X</u> Clamped _____			
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel		5 Fiberglass			
2 Brass		4 Galvanized steel		6 Concrete tile			
Screen or Perforation Openings Are:		7 Torch cut		8 Saw cut			
1 Continuous slot		3 Mill slot		6 Wire wrapped			
2 Louvered shutter		4 Key punched		9 Drilled holes			
Screen-Perforation Dia <u>6</u> in. to <u>38</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		5 Gauzed wrapped		8 Saw cut			
Screen-Perforated Intervals: From <u>28</u> ft. to <u>38</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		6 Wire wrapped		9 Drilled holes			
Gravel Pack Intervals: From <u>13</u> ft. to <u>38</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		7 Torch cut		10 Other (specify)			
5 GROUT MATERIAL:							
1 Neat cement		2 Cement grout		3 Bentonite			
4 Other		Grouted Intervals: From <u>3</u> ft. to <u>13</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		10 Fuel storage			
What is the nearest source of possible contamination:		11 Fertilizer storage		14 Abandoned water well			
1 Septic tank		4 Cess pool		7 Sewage lagoon			
2 Sewer lines		5 Seepage pit		8 Feed yard			
3 Lateral lines		6 Pit privy		9 Livestock pens			
Direction from well <u>NORTH</u>		How many feet <u>50</u>		? Water Well Disinfected? Yes <u>X</u> No _____			
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u>		If yes, date sample _____		Pump Installed? Yes _____ No <u>X</u>			
If Yes: Pump Manufacturer's name _____		Model No. _____		HP _____			
Depth of Pump Intake _____ ft.		Pumps Capacity rated at _____ gal./min.		Volts _____			
Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other							
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month <u>14</u> day <u>8.0</u> year _____							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>193</u>							
This Water Well Record was completed on _____ month <u>6</u> day <u>21</u> year <u>8.1</u> under the business name of <u>Price Water Well Service</u> by (signature) <u>John Davenport</u>							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	3	brown top soil			
		3	16	brown sandy clay			
		16	23	fine sand			
		23	38	fine gravel			
ELEVATION:							
Depth(s) Groundwater Encountered 1. <u>27</u> ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)							

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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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SEC.

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SE 1/4

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NW 1/4

NW 1/4