

1 LOCATION OF WATER WELL County: <u>Reno</u>	Fraction <u>SW 1/4 NW 1/4 SW 1/4</u>	Section Number <u>6</u>	Township Number <u>T 23 S</u>	Range Number <u>R 5 NW</u>
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Distance and direction from nearest town or city? \_\_\_\_\_ Street address of well if located within city? 2200 North Plum

2 WATER WELL OWNER: City Water Department Well No. M 4  
 RR#, St. Address, Box #: City Building Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Hutchinson, Ks. 67501 Application Number: \_\_\_\_\_

3 DEPTH OF COMPLETED WELL... 63.8 ft. Bore Hole Diameter... 6.3 in. to ... in. to ... ft.  
 Well Water to be used as:  
 1 Domestic 3 Feedlot 6 Oil field water supply 8 Air conditioning 11 Injection well  
 2 Irrigation 4 Industrial 7 Lawn and garden only 9 Dewatering 12 Other (Specify below)  
10 Observation well  
 Well's static water level... 16 ft. below land surface measured on ... month ... day 9 day 1984 year  
 Pump Test Data: Well water was ... ft. after ... hours pumping ... gpm  
 Est. Yield gpm: Well water was ... ft. after ... hours pumping ... gpm

4 TYPE OF BLANK CASING USED:  
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued  Clamped  
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded  
 7 Fiberglass Threaded  
 Blank casing dia ... 5 in. to ... 20 ft., Dia ... in. to ... ft., Dia ... in. to ... ft.  
 Casing height above land surface ... 32 in., weight ... lbs./ft. Wall thickness or gauge No. .214  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement  
 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify)  
 9 ABS 12 None used (open hole)  
 Screen or Perforation Openings Are:  
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 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-Perforation Dia ... 5 in. to ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft.  
 Screen-Perforated Intervals: From ... 20 ft. to ... 63 ft., From ... ft. to ... ft. to ... ft. to ... ft.  
 Gravel Pack Intervals: From ... 10 ft. to ... 63 ft., From ... ft. to ... ft. to ... ft. to ... ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other  
 Grouted Intervals: From ... 0 ft. to ... 10 ft., From ... ft. to ... ft. to ... ft. to ... ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well  
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well  
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)  
Fair Grounds  
 Direction from well ... West How many feet ... 500+ ? Water Well Disinfected? Yes  No   
 Was a chemical/bacteriological sample submitted to Department? Yes  No  If yes, date sample was submitted ... month ... day ... year: Pump Installed? Yes  No   
 If Yes: Pump Manufacturer's name \_\_\_\_\_ Model No. \_\_\_\_\_ HP \_\_\_\_\_ Volts \_\_\_\_\_  
 Depth of Pump Intake \_\_\_\_\_ ft. Pumps Capacity rated at \_\_\_\_\_ gal./min.  
 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 ... April month ... 19 day ... 1984 year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ... 102  
 This Water Well Record was completed on ... May month ... 18 day ... 1984 year under the business name of Layne Western Co., Inc. by (signature)

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	2	Top soil-sandy			
	2	5	Very fine sand			
	5	25	Fine - co. sand-fine-co. gravel w/v.co. gravel-loose			
	25	65	Med to co. sand-med. - to co. gravel w/co. gravel			
	65	80	Red and blue shale			

ELEVATION: \_\_\_\_\_  
 Depth(s) Groundwater Encountered 1... 16 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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