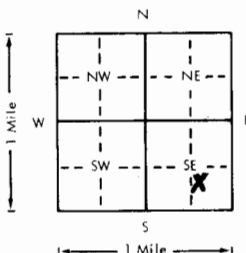


X

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Reno</u>		<u>NW</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$	<u>6</u>	T <u>23</u> S	R <u>5</u> E <u>W</u>
Distance and direction from nearest town or city?			Street address of well if located within city?		
			<u>1803 Landon Hutchinson</u>		
2 WATER WELL OWNER: <u>V. W. Gleason</u>					
RR#, St. Address, Box #: <u>1803 Landon</u>					
City, State, ZIP Code: <u>Hutchinson Kan. 67501</u>					
Board of Agriculture, Division of Water Resources					
Application Number:					
3 DEPTH OF COMPLETED WELL: <u>35</u> ft. Bore Hole Diameter: <u>9</u> in. to <u>19</u> ft. and _____ in. to _____ ft.					
Well Water to be used as:					
1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well					
2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)					
7 <u>Lawn and garden only</u> 10 Observation well					
Well's static water level: <u>19</u> ft. below land surface measured on _____ month _____ day _____ year					
Pump Test Data: Well water was <u>20</u> ft. after _____ hours pumping _____ gpm					
Est. Yield <u>60</u> 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 <u>X</u> Clamped _____					
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____					
7 Fiberglass Threaded _____					
Blank casing dia: <u>6</u> in. to <u>25</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height above land surface: <u>12</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>175</u>					
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: <u>6</u> in. to <u>35</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Screen-Perforated Intervals: From <u>25</u> ft. to <u>35</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
Gravel Pack Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
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.					
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) _____					
13 Watertight sewer lines					
Direction from well: <u>west</u> How many feet: <u>30</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 was submitted _____ month _____ day _____ year					
Pump Installed? Yes <u>X</u> No _____					
If Yes: Pump Manufacturer's name: <u>STA RITE</u> Model No. <u>40P</u> HP <u>2</u> Volts <u>230</u>					
Depth of Pump Intake: <u>30</u> ft. Pumps Capacity rated at <u>40</u> 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 _____ month _____ day _____ 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 _____ day _____ year 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 fine brown soil			
		3 11 sandy clay			
		11 17 fine gravel			
		17 35 medium gravel			
ELEVATION:					
Depth(s) Groundwater Encountered 1. <u>19</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
T
R
SEC
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NW. SE 1/4 SE 1/4