

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Reno		NW ¼ SW ¼ SW ¼		24		T 23 S		R 6 E/W	
Distance and direction from nearest town or city street address of well if located within city? 128 North Main; South Hutchinson, Kansas									
2 WATER WELL OWNER: Independent Oil Co.									
RR#, St. Address, Box # : 221 East E					Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : S. Hutchinson, Kansas 67505					Application Number:				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 19 ft. ELEVATION: 1526.88							
		Depth(s) Groundwater Encountered 1. 8 ft. 2. _____ ft. 3. _____ ft.							
		WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr							
		Pump test data: Well water was NA ft. after _____ hours pumping _____ gpm							
		Est. Yield NA gpm: Well water was _____ ft. after _____ hours pumping _____ gpm							
		Bore Hole Diameter 8 in. to 19 ft. and _____ in. to _____ ft.							
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well									
1 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 Air Sparge									
Was a chemical/bacteriological sample submitted to Department? Yes _____ No ☒ If yes, mo/day/yr sample was submitted									
Water Well Disinfected? Yes _____ No ☒									
5 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 diameter 2 in. to 18 ft. Dia. _____ in. to _____ ft. Dia. _____ in. to _____ ft.									
Casing height above land surface -8.16 in., weight _____ lbs./ft. Wall thickness or gauge No. Sch. 40									
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) _____									
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-PERFORATED INTERVALS: From 18 ft. to 19 ft. From _____ ft. to _____ ft.									
From _____ ft. to _____ ft. From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From 17 ft. to 19 ft. From _____ ft. to _____ ft.									
From _____ ft. to _____ ft. From _____ ft. to _____ ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____									
Grout Intervals: From 0 ft. to 15 ft. From 15 ft. to 17 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									
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 Former UST Basin									
Direction from well? Southwest How many feet? 55									
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
0 0.5 Sand/Gravel,									
0.5 3 Clay, Red/Orange									
3 6 Sand, Green/Brown									
6 8.5 Sand, Light Gray									
8.5 12 Sand, Gray									
12 19 Sand, Natural Sand									
AS-2, Tag # 00278926, Flushmount									
Project Name: Independent Oil Company - Remedial									
GeoCore # 612, KDHE # U2 078 1196									
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6/30/98 and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/yr) 9/2/98									
under the business name of GeoCore Services, Inc. by (signature) <i>[Signature]</i>									
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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