

1) LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Reno</u>		<u>SE ¼ NW ¼ SW ¼</u>	<u>1</u>	<u>T 23 S</u>	<u>R 6 E W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>400 Hyde Park Dr. Hutchinson</u>					
2) WATER WELL OWNER: <u>Bud Rainsberger</u>					
RR#, St. Address, Box #: <u>400 Hyde Park Dr.</u>					
City, State, ZIP Code: <u>Hutchinson Kan 67502</u>					
Board of Agriculture, Division of Water Resources Application Number:					
3) LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4) DEPTH OF COMPLETED WELL: <u>27</u> ft. ELEVATION:			
<p>A 2x2 grid representing a section box. The quadrants are labeled NW, NE, SW, SE. An 'X' is marked in the SW quadrant.</p>		Depth(s) Groundwater Encountered 1. <u>14</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>14</u> ft. below land surface measured on mo/day/yr <u>9-24-92</u>			
		Pump test data: Well water was <u>15</u> ft. after <u>1</u> hours pumping <u>20</u> gpm			
		Est. Yield <u>50</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>6</u> in. to <u>20</u> ft., and <u>4</u> in. to <u>27</u> 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			
		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)		CASING JOINTS: Glued <u>X</u> Clamped _____	
② PVC		4 ABS		Welded _____	
Blank casing diameter <u>4</u> in. to <u>20</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		5 Wrought iron		Threaded _____	
Casing height above land surface <u>12</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>250</u>		6 Asbestos-Cement			
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 Fiberglass			
1 Steel		8 RMP (SR)		10 Asbestos-cement	
2 Brass		9 ABS		11 Other (specify) _____	
3 Stainless steel				12 None used (open hole)	
4 Galvanized steel					
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped		8 Saw cut	
1 Continuous slot		6 Wire wrapped		⑨ Drilled holes	
2 Louvered shutter		7 Torch cut		10 Other (specify) _____	
3 Mill slot					
4 Key punched					
SCREEN-PERFORATED INTERVALS: From <u>20</u> ft. to <u>27</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From _____ ft. to _____ 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 <u>0</u> ft. to <u>20</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines		7 Pit privy	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
③ Watertight sewer lines		6 Seepage pit		9 Feedyard	
Direction from well? <u>South</u>				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below)	
				How many feet? <u>20</u>	
FROM		TO		LITHOLOGIC LOG	
FROM		TO		PLUGGING INTERVALS	
<u>re case existing 6" well</u>					
<u>20 27 medium gravel</u>					
7) CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) deconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>9-24-92</u> 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 (mo/day/yr) <u>7-1-93</u> under the business name of <u>Price Water Well Serv.</u> by (signature) <u>[Signature]</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.					