

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Reno		SW ¼ NE ¼ NE ¼	2	T 23 S	R 6 EW
Distance and direction from nearest town or city street address of well if located within city? 8 Windmere Ct Hutchinson					
2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :		Scott Hayes 8 Windmere Ct Hutchinson Kan 67502  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.....36 ft. ELEVATION:			
<div style="text-align:center;">N NW--NE X SE--SW S</div>		Depth(s) Groundwater Encountered 1...18 ft. 2....ft. 3....ft.			
		WELL'S STATIC WATER LEVEL ...18 ft. below land surface measured on mo/day/yr 9-5-91 Pump test data: Well water was ...19 ft. after ... hours pumping 30 gpm Est. Yield 7.5 gpm; Well water was ... ft. after ... hours pumping ... gpm Bore Hole Diameter .9 in. to 26 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 ..... Was a chemical/bacteriological sample submitted to Department? Yes.....No..X.; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes X No			
5 TYPE OF BLANK CASING USED:					
Blank casing diameter .....6 in. to 26 ft., Dia .....in. to .....ft., Dia .....in. to .....ft. Casing height above land surface .....12 in., weight .....lbs./ft. Wall thickness or gauge No. 250 TYPE OF SCREEN OR PERFORATION MATERIAL:					
SCREEN OR PERFORATION OPENINGS ARE:					
SCREEN-PERFORATED INTERVALS: From 26 ft. to 36 ft., From .....ft. to .....ft.					
GRAVEL PACK INTERVALS: From .....ft. to .....ft., From .....ft. to .....ft.					
6 GROUT MATERIAL:					
Grout Intervals: From 25 ft. to 03 ft., From .....ft. to .....ft., From .....ft. to .....ft.					
What is the nearest source of possible contamination:					
Direction from well? West How many feet? 35					
		LITHOLOGIC LOG			PLUGGING INTERVALS
FROM	TO		FROM	TO	
0	2	Sandy Soil			
2	11	sandy clay			
11	16	fine sand			
16	19	fine gravel			
19	36	medium gravel			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 9-5-91 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 193 This Water Well Record was completed on (mo/day/yr) 6-30-92 under the business name of Price Water Well Serv. by (signature) John Dawsonport					
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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					