

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: <u>Ren</u>		<u>NE 1/4 NE 1/4 NE 1/4</u>	<u>17</u>	<u>T 23 S</u>	<u>R 6 E/W</u>		
Distance and direction from nearest town or city? <u>1 west Hated</u> <u>1/2 mi 400' west</u>			Street address of well if located within city?				
2 WATER WELL OWNER: <u>in field</u> <u>Fun Valley</u> RR#, St. Address, Box # : <u>16 W. 4th</u> City, State, ZIP Code : <u>Hutchinson KS 67501</u> Board of Agriculture, Division of Water Resources Application Number:							
3 DEPTH OF COMPLETED WELL: <u>20</u> ft. Bore Hole Diameter: <u>2.8</u> in. to <u>20</u> ft. and _____ in. to _____ ft.							
Well Water to be used as:							
<input checked="" type="checkbox"/> Domestic		5 Public water supply		8 Air conditioning			
3 Feedlot		6 Oil field water supply		11 Injection well			
2 Irrigation		7 Lawn and garden only		12 Other (Specify below)			
4 Industrial		10 Observation well					
Well's static water level: <u>4</u> ft. below land surface measured on <u>5</u> month <u>30</u> day <u>80</u> year							
Pump Test Data: Well water was <u>6</u> ft. after <u>1</u> hours pumping <u>100</u> gpm							
Est. Yield <u>100</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm							
4 TYPE OF BLANK CASING USED:							
1 Steel		5 Wrought iron		8 Concrete tile			
3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below)			
<input checked="" type="checkbox"/> PVC		7 Fiberglass		Casing Joints: Glued <input checked="" type="checkbox"/> Clamped _____			
4 ABS				Welded _____			
				Threaded _____			
Blank casing dia <u>10</u> in. to <u>0</u> ft. Dia <u>10</u> in. to <u>10</u> ft. Dia _____ in. to _____ ft.							
Casing height above land surface: <u>6</u> in., weight <u>160</u> lbs./ft. Wall thickness or gauge No <u>38.5</u>							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel		5 Fiberglass			
2 Brass		4 Galvanized steel		6 Concrete tile			
				8 RMP (SR)			
				9 ABS			
				10 Asbestos-cement			
				11 Other (specify) _____			
				12 None used (open hole)			
Screen or Perforation Openings Are:							
1 Continuous slot		3 Mill slot		5 Gauzed wrapped			
2 Louvered shutter		4 Key punched		6 Wire wrapped			
				7 Torch cut			
				8 Saw cut			
				9 Drilled holes			
				10 Other (specify) _____			
Screen-Perforation Dia <u>10</u> in. to <u>10</u> ft. Dia <u>10</u> in. to <u>20</u> ft. Dia _____ in. to _____ ft.							
Screen-Perforated Intervals: From <u>10</u> ft. to <u>20</u> ft. From _____ ft. to _____ ft.							
Gravel Pack Intervals: From <u>10</u> ft. to <u>20</u> ft. From _____ ft. to _____ ft.							
5 GROUT MATERIAL:							
1 Neat cement		2 Cement grout		3 Bentonite			
4 Other							
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft. From _____ ft. to _____ ft.							
What is the nearest source of possible contamination:							
1 Septic tank		4 Cess pool		7 Sewage lagoon			
2 Sewer lines		5 Seepage pit		8 Feed yard			
3 Lateral lines		6 Pit privy		9 Livestock pens			
				10 Fuel storage			
				11 Fertilizer storage			
				12 Insecticide storage			
				13 Watertight sewer lines			
				14 Abandoned water well			
				15 Oil well/Gas well			
				16 Other (specify below) <u>none</u>			
Direction from well _____ How many feet _____ ? Water Well Disinfected? Yes <input checked="" type="checkbox"/> No							
Was a chemical/bacteriological sample submitted to Department? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> If yes, date sample _____							
was submitted _____ month _____ day _____ year: Pump installed? Yes <input checked="" type="checkbox"/> No							
If Yes: Pump Manufacturer's name <u>Red Jacket</u> Model No <u>4 RH</u> HP <u>7 1/2</u> Volts _____							
Depth of Pump Intake _____ ft. Pumps Capacity rated at <u>180</u> gal./min.							
Type of pump: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Centrifugal <input type="checkbox"/> Reciprocating <input type="checkbox"/> Other							
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on <u>5</u> month <u>30</u> day <u>80</u> year							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>134</u>							
This Water Well Record was completed on <u>6</u> month <u>7</u> day <u>80</u> year under the business name of <u>Rosenberry &amp; Benis</u> by (signature) <u>Mike Flavers</u>							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		<u>0</u>	<u>3</u>	<u>TS</u>			
		<u>3</u>	<u>4</u>	<u>clay</u>			
		<u>4</u>	<u>20</u>	<u>med sand</u>			
ELEVATION:							
Depth(s) Groundwater Encountered <u>1</u> ft. <u>2</u> ft. <u>3</u> ft. <u>4</u> 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.