

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Reno</u>		<u>NW 1/4 NE 1/4 NW 1/4</u>	<u>23</u>	<u>T 23 S</u>	<u>R 6 E/W</u>
Distance and direction from nearest town or city? <u>1 west 30 miles</u>			Street address of well if located within city?		

2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # : <u>Morton Salt</u>		Application Number:
City, State, ZIP Code : <u>South Hutch. Kansas 67505</u>		

3 DEPTH OF COMPLETED WELL: <u>40</u> ft. Bore Hole Diameter: <u>28</u> in. to <u>75</u> 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 Observation well
Well's static water level: <u>14' 6"</u> ft. below land surface measured on _____ month <u>18</u> day <u>80</u> year	
Pump Test Data: Well water was <u>29</u> ft. after _____ hours pumping <u>600</u> gpm	
Est. Yield <u>700</u> gpm: Well water was <u>27</u> ft. after <u>2</u> hours pumping <u>500</u> gpm	

4 TYPE OF BLANK CASING USED:		Casing Joints: Glued _____ Clamped _____
1 Steel 3 RMP (SR) 2 PVC 4 ABS		5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) 10 Observation well 11 Injection well 12 Other (Specify below)
Blank casing dia. <u>16</u> in. to <u>250</u> ft. Dia _____ in. to <u>40 25</u> ft. Dia _____ in. to _____ ft.		
Casing height above land surface: <u>24</u> in., weight <u>50</u> lbs./ft. Wall thickness or gauge No. <u>375</u>		
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC 10 Asbestos-cement 11 Other (specify) _____ 12 None used (open hole)
1 Steel 2 Stainless steel 3 Fiberglass 8 RMP (SR) 11 Other (specify) _____ 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)		
Screen or Perforation Openings Are:		5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____
Screen-Perforation Dia. <u>16</u> in. to <u>25</u> ft. Dia _____ in. to <u>40</u> ft. Dia _____ in. to _____ ft.		
Screen-Perforated Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft.		
Gravel Pack Intervals: From <u>10</u> ft. to <u>40</u> ft. From _____ ft. to _____ ft.		

5 GROUT MATERIAL: <u>Neat cement</u>		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:		10 Fuel storage	14 Abandoned water well	
1 Septic tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 15 Oil well/Gas well 2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 16 Other (specify below) <u>50H</u> 3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines				
Direction from well _____ How many feet _____ ? Water Well Disinfected? Yes _____ No <u>X</u>				
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, date sample _____				
If Yes: Pump Manufacturer's name _____ Model No. <u>2 Stage DRL</u> HP <u>10</u> Volts <u>460</u>				
Depth of Pump Intake <u>35</u> ft. Pumps Capacity rated at <u>500</u> gal./min.				
Type of pump: 1 Submersible <u>2 Turbine</u> 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 _____ Jan. _____ month _____ 18 _____ day _____ 1980 _____ year.	
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>000 134</u>	
This Water Well Record was completed on _____ Jan. _____ month _____ 30 _____ day _____ 1980 _____ year under the business name of <u>Rosencrantz Bemis Ent. Inc.</u> by (signature) <u>Mike Flowers</u>	

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM		TO		LITHOLOGIC LOG		FROM		TO		LITHOLOGIC LOG	
		0		3		Top soil							
		3		9		Clay							
		9		19		Medium Sand							
		19		22		Clay							
		22		39 1/2		Medium sand, loose took water							

ELEVATION:	
Depth(s) Groundwater Encountered 1. _____ 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

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