

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number																																																						
County: <b>RENO</b>		<b>SE</b> 1/4 <b>NE</b> 1/4 <b>SE</b> 1/4	<b>24</b>	T <b>23</b> S	R <b>6</b> E																																																						
Distance and direction from nearest town or city street address of well if located within city? <b>HUTCHINSON CITY PARK</b>																																																											
2 WATER WELL OWNER: <b>CITY OF HUTCHINSON CITY PARK DEPT. ATT MURCH</b>																																																											
RR#, St. Address, Box # <b>P.O. BOX 1567 - HUTCHINSON KS. 67504</b>				Board of Agriculture, Division of Water Resources																																																							
City, State, ZIP Code				Application Number:																																																							
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <b>18</b> ft. ELEVATION:																																																									
		Depth(s) Groundwater Encountered 1. <b>12.5</b> ft. 2. _____ ft. 3. _____ ft.																																																									
		WELL'S STATIC WATER LEVEL <b>13.4</b> ft. below land surface measured on mo/day/yr <b>09-01-94</b>																																																									
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm																																																									
		Est. Yield _____ gpm; Well water was _____ ft. after _____ hours pumping _____ gpm																																																									
		Bore Hole Diameter: <b>8.625</b> in. to <b>18</b> 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 <u>Monitoring well</u>																																																									
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____																																																									
		Water Well Disinfected? Yes _____ No <input checked="" type="checkbox"/>																																																									
5 TYPE OF BLANK CASING USED:																																																											
1 Steel      3 RMP (SR)      5 Wrought iron      8 Concrete tile      CASING JOINTS: Glued _____ Clamped _____ 2 <u>PVC</u> 4 ABS      6 Asbestos-Cement      9 Other (specify below)      Welded _____ 7 Fiberglass      Threaded <input checked="" type="checkbox"/>																																																											
Blank casing diameter <b>2</b> in. to <b>8</b> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.																																																											
Casing height above land surface <b>0</b> in. weight <b>54.40</b> lbs./ft. Wall thickness or gauge No. _____																																																											
TYPE OF SCREEN OR PERFORATION MATERIAL:																																																											
1 Steel      3 Stainless steel      5 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:																																																											
1 Continuous slot      3 <u>Mill slot</u> 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 <b>8</b> ft. to <b>18</b> ft. From _____ ft. to _____ ft.																																																											
From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																																											
GRAVEL PACK INTERVALS: From <b>7</b> ft. to <b>18</b> ft. From _____ ft. to _____ ft.																																																											
From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																																											
6 GROUT MATERIAL:																																																											
1 Neat cement      2 <u>Cement grout</u> 3 <u>Bentonite</u> 4 Other _____ Grout Intervals: From <b>0</b> ft. to <b>6</b> ft. From <b>5</b> ft. to <b>7</b> 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 <u>Fuel storage CORRECTED</u> 15 Oil well/Gas well 3 Watertight sewer lines      6 Seepage pit      9 Feedyard      12 Fertilizer storage      16 Other (specify below) _____ 13 Insecticide storage _____																																																											
Direction from well? _____ How many feet? _____																																																											
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td><b>0</b></td> <td><b>.5</b></td> <td><b>ASPHALT</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>.5</b></td> <td><b>4.5</b></td> <td><b>SANDY LOAM</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>4.5</b></td> <td><b>5</b></td> <td><b>SDY-CLAY</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>5</b></td> <td><b>12</b></td> <td><b>SANDY SILT</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>12</b></td> <td><b>17</b></td> <td><b>SAND</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>17</b></td> <td><b>18</b></td> <td><b>SDY-CLAY</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>TD</b></td> <td><b>18</b></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="6" style="text-align: center;"> <b>FLUSH MOUNT WELDER</b>  <b>08-02-94</b>  <b>DOV TAYLOR</b> </td> </tr> </tbody> </table>						FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	<b>0</b>	<b>.5</b>	<b>ASPHALT</b>				<b>.5</b>	<b>4.5</b>	<b>SANDY LOAM</b>				<b>4.5</b>	<b>5</b>	<b>SDY-CLAY</b>				<b>5</b>	<b>12</b>	<b>SANDY SILT</b>				<b>12</b>	<b>17</b>	<b>SAND</b>				<b>17</b>	<b>18</b>	<b>SDY-CLAY</b>				<b>TD</b>	<b>18</b>					<b>FLUSH MOUNT WELDER</b> <b>08-02-94</b> <b>DOV TAYLOR</b>					
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>08-31-94</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>479</b> This Water Well Record was completed on (mo/day/yr) <b>09-26-94</b> under the business name of <b>EBBERTS DRILLING</b> by (signature) <i>Robert Ebert</i>																																																											
INSTRUCTIONS: Use typewriter or ball point pen, PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answer. 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.																																																											