

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Reno</u>		<u>SW ¼ SW ¼ SW ¼</u>	<u>33</u>	T <u>23</u> S	R <u>7</u> E <u>NW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>2 mi N, 1 W of Partridge</u>					
2 WATER WELL OWNER: <u>William Schmucker</u>					
RR#, St. Address, Box # : <u>3315 W Morgan</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Hutch KS 67501</u>			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>6.5</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft.			
		WELL'S STATIC WATER LEVEL <u>3.8</u> ft. below land surface measured on mo/day/yr <u>1-19-05</u>			
		Pump test data: Well water was <u>5.8</u> ft. after <u>12</u> hours pumping <u>2.0</u> gpm			
		Est. Yield <u>2.8</u> gpm: Well water was ft. after hours pumping gpm			
WELL WATER TO BE USED AS: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Public water supply <input type="checkbox"/> Air conditioning <input type="checkbox"/> Injection well <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 4 Industrial <input type="checkbox"/> 7 Domestic (lawn & garden) <input type="checkbox"/> 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? <u>(Yes)</u> No					
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped
<input checked="" type="radio"/> PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded
			7 Fiberglass		Threaded
Blank casing diameter <u>5</u> in. to <u>4.5</u> ft., Dia in. to ft., Dia in. to ft.					
Casing height above land surface <u>12</u> in., weight <u>2.29</u> lbs./ft. Wall thickness or gauge No. <u>16.0</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless Steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-Cement
2 Brass		4 Galvanized Steel	6 Concrete tile	9 ABS	11 Other (Specify)
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		3 Mill slot	5 Gauzed wrapped	<input checked="" type="radio"/> Saw cut	11 None (open hole)
2 Louvered shutter		4 Key punched	6 Wire wrapped	9 Drilled holes	
SCREEN-PERFORATED INTERVALS: From <u>4.5</u> ft. to <u>6.5</u> ft., From ft. to ft.					
GRAVEL PACK INTERVALS: From <u>2.3</u> ft. to <u>6.8</u> ft., From ft. to ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> Bentonite 4 Other					
Grout Intervals: From <u>3</u> ft. to <u>2.3</u> 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	10 Livestock pens	14 Abandoned water well
2 Sewer lines		5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines		6 Seepage pit	9 Feedyard	12 Fertilizer storage	<input checked="" type="radio"/> Other (specify below)
Direction from well?				How many feet?	
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS					
0	6	Br Clay			
6	16	Br clay silt			
16	45	Br clay			
45	65	Layers F sand + clay			
65	68	Shale			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="radio"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>1-19-05</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No <u>447</u> This Water Well Record was completed on (mo/day/yr) <u>2-2-05</u> under the business name of <u>Miller Drilling</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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.					