

1 LOCATION OF WATER WELL:		Fraction	PUMP WWS	RSA USE DATE	Township Number	Range Number
County: <u>Reno</u>	<u>NE ¼ NE ¼ NE ¼</u>	<u>34</u>	<u>24</u>	<u>S</u>	<u>5</u>	<u>EWD</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1 mi S, 1 E of Yoder - 11203 S Obce Rd</u>						
2 WATER WELL OWNER: <u>Toby Yoder</u>						
RR#, St. Address, Box # : <u>11203 S Obce Rd</u>				Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Haven, KS 67543</u>				Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>148</u> ft. ELEVATION:				
<p>A 2x2 grid representing a section box. The quadrants are labeled NW, NE, SW, and SE. An 'X' is marked in the center of the NE quadrant.</p>		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.				
		WELL'S STATIC WATER LEVEL ... <u>24</u> ... ft. below land surface measured on mo/day/yr <u>7-29-96</u>				
		Pump test data: Well water was ... <u>140</u> ... ft. after ... <u>2</u> ... hours pumping ... <u>3</u> ... gpm				
		Est. Yield ... <u>3</u> ... gpm: Well water was ... ft. after ... hours pumping ... gpm				
		Bore Hole Diameter ... <u>9</u> ... in. to ... <u>6.9</u> ... ft., and ... <u>5 ½</u> ... in. to ... <u>148</u> ... ft.				
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well <u>(1)</u> 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... <u>X</u>; If yes, mo/day/yr sample was submitted						
Water Well Disinfected? Yes <u>X</u> No						
5 TYPE OF BLANK CASING USED:						
1 Steel		3 RMP (SR)		5 Wrought iron		CASING JOINTS: Glued <u>X</u> Clamped
<u>(2)</u> PVC		4 ABS		6 Asbestos-Cement		Welded
				7 Fiberglass		Threaded
Blank casing diameter ... <u>6</u> ... in. to ... <u>6.9</u> ... ft., Dia						
Casing height above land surface ... <u>12</u> ... in., weight						lbs./ft. Wall thickness or gauge No. <u>16.0</u>
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel		3 Stainless steel		5 Fiberglass		7 PVC
2 Brass		4 Galvanized steel		6 Concrete tile		8 RMP (SR)
						9 ABS
						<u>(12)</u> None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:						
1 Continuous slot		3 Mill slot		5 Gauzed wrapped		8 Saw cut
2 Louvered shutter		4 Key punched		6 Wire wrapped		<u>(11)</u> None (open hole)
				7 Torch cut		9 Drilled holes
						10 Other (specify)
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.						
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>(3)</u> Bentonite 4 Other						
Grout Intervals: From ... <u>3</u> ... ft. to ... <u>23</u> ... ft., From ... <u>64</u> ... ft. to ... <u>69</u> ... ft., From ft. to ft.						
What is the nearest source of possible contamination:						
1 Septic tank		4 Lateral lines		<u>(7)</u> Pit privy		10 Livestock pens
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage
						13 Insecticide storage
						14 Abandoned water well
						15 Oil well/Gas well
						16 Other (specify below)
Direction from well? <u>SE</u> How many feet? <u>80</u>						
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
<u>0</u>	<u>31</u>	<u>Br clay</u>				
<u>31</u>	<u>35</u>	<u>clay silt</u>				
<u>35</u>	<u>61</u>	<u>Rocky Br clay</u>				
<u>61</u>	<u>63</u>	<u>C Sand</u>				
<u>63</u>	<u>148</u>	<u>Shale</u>				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) ... <u>7-29-96</u> ... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ... <u>447</u> ... This Water Well Record was completed on (mo/day/yr) ... <u>8-5-96</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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.						