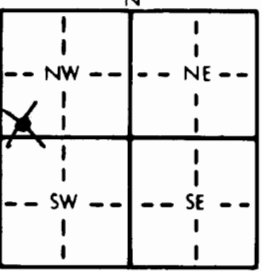


1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Reno</u>		<u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$	<u>7</u>	<u>T 24</u> <u>S</u>	<u>R 5</u> <u>W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>2 miles South &amp; 2 miles East of South Hutchinson, KS</u>					
2 WATER WELL OWNER: <u>C.B. Showalter</u>					
RR#, St. Address, Box # : <u>8803 E. Arlington Rd.</u>					
City, State, ZIP Code : <u>Haven, KS 67543</u>					
Board of Agriculture, Division of Water Resources Application Number: <u>41,519</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>122</u> ft. ELEVATION: .....			
		Depth(s) Groundwater Encountered <u>1</u> <u>17</u> ft. <u>2</u> ft. <u>3</u> ft. ....			
		WELL'S STATIC WATER LEVEL <u>17</u> ft. below land surface measured on mo/day/yr <u>4-4-95</u>			
		Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm			
		Est. Yield <u>1000-1500</u> Well water was ..... ft. after ..... hours pumping ..... gpm			
		Bore Hole Diameter <u>30</u> in. to <u>122</u> ft. and ..... in. to ..... ft.			
WELL WATER TO BE USED AS:					
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 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 8 Concrete tile CASING JOINTS: Glued <u>X</u> Clamped .....					
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded .....					
7 Fiberglass Threaded .....					
Blank casing diameter ..... <u>1.6</u> in. to ..... <u>82</u> ft. Dia ..... in. to ..... ft.					
Casing height above land surface ..... <u>12</u> in., weight ..... <u>1.6</u> <u>15</u> lbs./ft. Wall thickness or gauge No. .... <u>500</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement					
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) .....					
9 ABS 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot 3 Mill slot 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 ..... <u>82</u> ft. to ..... <u>122</u> ft. From ..... ft. to ..... ft.					
From ..... ft. to ..... ft. From ..... ft. to ..... ft.					
GRAVEL PACK INTERVALS: From ..... <u>20</u> ft. to ..... <u>122</u> ft. From ..... ft. to ..... ft.					
From ..... ft. to ..... ft. From ..... ft. to ..... ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....					
Grout intervals: From ..... <u>0</u> ft. to ..... <u>20</u> ft. From ..... ft. to ..... ft. From ..... ft. to ..... ft.					
What is the nearest source of possible contamination: <u>None within 1/4 mile</u>					
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 14 Abandoned water well					
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/Gas well					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below)					
Direction from well? How many feet?					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top Soil			
3	8	Sand & Clay Mix			
8	17	Sand-Med.			
17	30	Clay-Red			
30	35	Sand.-Med.			
35	36	Clay			
36	43	Sand-Med.			
43	59	Clay-Hard			
59	62	Sand-Med.			
62	72	Clay			
72	74	Sand-Fine			
74	122	Sand-Med. to Course			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) ..... <u>4-4-95</u> ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .... <u>138</u> ..... This Water Well Record was completed on (mo/day/yr) ..... <u>4-12-95</u> ..... under the business name of <u>Peterson Irrigation Inc.</u> by (signature) <u>Mike Peterson</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.					