

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number																																																						
County: <b>Reno</b>		<b>SE 1/4 NE 1/4 NE 1/4</b>	<b>1</b>	<b>T 24 S</b>	<b>R 6 E</b>																																																						
Distance and direction from nearest town or city street address of well if located within city? <b>1 S 1 E 1/4 S of Hwy 50 # 61 S. of Hutchinson</b>																																																											
2 WATER WELL OWNER: <b>Larry Dos Kocil</b>																																																											
RR#, St. Address, Box #: <b>321 N. Main</b>																																																											
City, State, ZIP Code: <b>South Hutchinson Kan. 67501</b>																																																											
Board of Agriculture, Division of Water Resources Application Number:																																																											
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <b>86</b> ft. ELEVATION:																																																									
		Depth(s) Groundwater Encountered 1. <b>14</b> ft. 2. .... ft. 3. .... ft.																																																									
		WELL'S STATIC WATER LEVEL <b>14</b> ft. below land surface measured on mo/day/yr <b>9-7-84</b>																																																									
		Pump test data: Well water was <b>16</b> ft. after <b>1</b> hours pumping <b>40</b> gpm																																																									
		Est. Yield <b>75</b> gpm: Well water was .... ft. after .... hours pumping .... gpm																																																									
		Bore Hole Diameter <b>12</b> in. to <b>86</b> ft., and .... in. to .... ft.																																																									
		WELL WATER TO BE USED AS:																																																									
		<input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Injection well <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Lawn and garden only <input type="checkbox"/> Observation well <input type="checkbox"/> Other (Specify below)																																																									
		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 <input checked="" type="checkbox"/> No																																																									
5 TYPE OF BLANK CASING USED:																																																											
<input type="checkbox"/> 1 Steel <input type="checkbox"/> 3 RMP (SR) <input type="checkbox"/> 5 Wrought iron <input type="checkbox"/> 8 Concrete tile    CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped ..... <input checked="" type="checkbox"/> 2 PVC <input type="checkbox"/> 4 ABS <input type="checkbox"/> 6 Asbestos-Cement <input type="checkbox"/> 9 Other (specify below)    Welded ..... <input type="checkbox"/> 7 Fiberglass    Threaded .....																																																											
Blank casing diameter <b>8</b> in. to <b>7.1</b> ft., Dia. .... in. to .... ft., Dia. .... in. to .... ft.																																																											
Casing height above land surface <b>12</b> in., weight .... lbs./ft. Wall thickness or gauge No. <b>320</b>																																																											
TYPE OF SCREEN OR PERFORATION MATERIAL:																																																											
<input type="checkbox"/> 1 Steel <input type="checkbox"/> 3 Stainless steel <input type="checkbox"/> 5 Fiberglass <input checked="" type="checkbox"/> 8 RMP (SR) <input type="checkbox"/> 10 Asbestos-cement <input type="checkbox"/> 2 Brass <input type="checkbox"/> 4 Galvanized steel <input type="checkbox"/> 6 Concrete tile <input type="checkbox"/> 9 ABS <input type="checkbox"/> 11 Other (specify) ..... <input type="checkbox"/> 12 None used (open hole)																																																											
SCREEN OR PERFORATION OPENINGS ARE:																																																											
<input type="checkbox"/> 1 Continuous slot <input type="checkbox"/> 3 Mill slot <input type="checkbox"/> 5 Gauzed wrapped <input type="checkbox"/> 8 Saw cut <input type="checkbox"/> 11 None (open hole) <input type="checkbox"/> 2 Louvered shutter <input type="checkbox"/> 4 Key punched <input type="checkbox"/> 6 Wire wrapped <input checked="" type="checkbox"/> 9 Drilled holes <input type="checkbox"/> 7 Torch cut <input type="checkbox"/> 10 Other (specify) .....																																																											
SCREEN-PERFORATED INTERVALS: From <b>7.1</b> ft. to <b>86</b> ft., From .... ft. to .... ft.																																																											
GRAVEL PACK INTERVALS: From <b>13</b> ft. to <b>86</b> ft., From .... ft. to .... ft.																																																											
6 GROUT MATERIAL: <input checked="" type="checkbox"/> 1 Neat cement <input type="checkbox"/> 2 Cement grout <input type="checkbox"/> 3 Bentonite <input type="checkbox"/> 4 Other .....																																																											
Grout Intervals: From <b>3</b> ft. to <b>13</b> ft., From .... ft. to .... ft.																																																											
What is the nearest source of possible contamination:																																																											
<input checked="" type="checkbox"/> 1 Septic tank <input type="checkbox"/> 4 Lateral lines <input type="checkbox"/> 7 Pit privy <input type="checkbox"/> 10 Livestock pens <input type="checkbox"/> 14 Abandoned water well <input type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 5 Cess pool <input type="checkbox"/> 8 Sewage lagoon <input type="checkbox"/> 11 Fuel storage <input type="checkbox"/> 15 Oil well/Gas well <input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 9 Feedyard <input type="checkbox"/> 12 Fertilizer storage <input type="checkbox"/> 16 Other (specify below) <input type="checkbox"/> 13 Insecticide storage																																																											
Direction from well? <b>West</b> How many feet? <b>100</b>																																																											
<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>LITHOLOGIC LOG</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>2</td> <td>Sandy soil</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2</td> <td>7</td> <td>Sandy clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>7</td> <td>11</td> <td>fine sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>11</td> <td>14</td> <td>fine gravel</td> <td></td> <td></td> <td></td> </tr> <tr> <td>14</td> <td>46</td> <td>medium gravel</td> <td></td> <td></td> <td></td> </tr> <tr> <td>46</td> <td>57</td> <td>Sandy clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>57</td> <td>82</td> <td>medium gravel</td> <td></td> <td></td> <td></td> </tr> <tr> <td>82</td> <td>86</td> <td>clay</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	0	2	Sandy soil				2	7	Sandy clay				7	11	fine sand				11	14	fine gravel				14	46	medium gravel				46	57	Sandy clay				57	82	medium gravel				82	86	clay			
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>9-7-84</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>193</b> This Water Well Record was completed on (mo/day/yr) <b>6-10-85</b> under the business name of <b>Prime Water Well Serv.</b> by (signature) <b>John Davenport</b>																																																											
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, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.																																																											