

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Edwards</u>		<u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$	<u>26</u>	T <u>26</u> S	R <u>17</u> E/W
Distance and direction from nearest town or city? <u>3.5 E Fellsburg Kans.</u>			Street address of well if located within city?		
2 WATER WELL OWNER: <u>Ron Gray</u>					
RR#, St. Address, Box #			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code: <u>Lewis Kansas</u>			Application Number:		
3 DEPTH OF COMPLETED WELL: <u>60</u> ft. Bore Hole Diameter: <u>8 3/4</u> in. to in. to ft.					
Well Water to be used as:					
<input checked="" type="checkbox"/> Domestic		<input type="checkbox"/> 3 Feedlot		<input type="checkbox"/> 8 Air conditioning	
<input type="checkbox"/> 2 Irrigation		<input type="checkbox"/> 4 Industrial		<input type="checkbox"/> 11 Injection well	
<input type="checkbox"/> 5 Public water supply		<input type="checkbox"/> 6 Oil field water supply		<input type="checkbox"/> 9 Dewatering	
<input type="checkbox"/> 7 Lawn and garden only		<input type="checkbox"/> 10 Observation well		<input type="checkbox"/> 12 Other (Specify below)	
<u>Pasture</u>					
Well's static water level: <u>18</u> ft. below land surface measured on month day year					
Pump Test Data: Well water was: <u>18</u> ft. after <u>1</u> hours pumping: <u>4</u> gpm					
Est. Yield: <u>20</u> gpm: Well water was ft. after hours pumping gpm					
4 TYPE OF BLANK CASING USED:					
<input type="checkbox"/> 1 Steel		<input checked="" type="checkbox"/> 3 RMP (SR)		<input type="checkbox"/> 8 Concrete tile	
<input type="checkbox"/> 2 PVC		<input type="checkbox"/> 4 ABS		<input type="checkbox"/> 9 Other (specify below)	
<input type="checkbox"/> 5 Wrought iron		<input type="checkbox"/> 6 Asbestos-Cement		Casing Joints: Glued <input checked="" type="checkbox"/> Clamped	
<input type="checkbox"/> 7 Fiberglass				Welded	
				Threaded	
Blank casing dia: <u>5</u> in. to ft. Dia: <u>5"</u> in. to <u>40</u> ft. Dia in. to ft.					
Casing height above land surface: <u>16</u> in. weight <u>1.75</u> lbs./ft. Wall thickness or gauge No. <u>SDR-26</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
<input type="checkbox"/> 1 Steel		<input type="checkbox"/> 3 Stainless steel		<input type="checkbox"/> 7 PVC	
<input type="checkbox"/> 2 Brass		<input type="checkbox"/> 4 Galvanized steel		<input checked="" type="checkbox"/> 8 RMP (SR)	
<input type="checkbox"/> 5 Fiberglass		<input type="checkbox"/> 6 Concrete tile		<input type="checkbox"/> 10 Asbestos-cement	
<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 checked="" type="checkbox"/> 5 Gauzed wrapped	
<input type="checkbox"/> 2 Louvered shutter		<input type="checkbox"/> 4 Key punched		<input type="checkbox"/> 6 Wire wrapped	
				<input type="checkbox"/> 7 Torch cut	
				<input type="checkbox"/> 9 Drilled holes	
				<input type="checkbox"/> 10 Other (specify)	
Screen-Perforation Dia: <u>5"</u> in. to ft. Dia in. to ft.					
Screen-Perforated Intervals: From <u>40</u> ft. to <u>60</u> ft. From ft. to ft.					
Gravel Pack Intervals: From <u>25</u> ft. to <u>60</u> ft. From ft. to ft.					
5 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					
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft. From ft. to ft.					
What is the nearest source of possible contamination:					
<input type="checkbox"/> 1 Septic tank		<input type="checkbox"/> 4 Cess pool		<input type="checkbox"/> 7 Sewage lagoon	
<input type="checkbox"/> 2 Sewer lines		<input type="checkbox"/> 5 Seepage pit		<input type="checkbox"/> 8 Feed yard	
<input type="checkbox"/> 3 Lateral lines		<input type="checkbox"/> 6 Pit privy		<input type="checkbox"/> 9 Livestock pens	
				<input type="checkbox"/> 10 Fuel storage	
				<input type="checkbox"/> 11 Fertilizer storage	
				<input type="checkbox"/> 12 Insecticide storage	
				<input type="checkbox"/> 13 Watertight sewer lines	
				<input type="checkbox"/> 14 Abandoned water well	
				<input type="checkbox"/> 15 Oil well/Gas well	
				<input type="checkbox"/> 16 Other (specify below)	
<u>Pond</u>					
Direction from well: <u>East</u> How many feet: <u>150</u> ? Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>					
Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, date sample was submitted month day year: Pump Installed? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>					
If Yes: Pump Manufacturer's name Model No. HP Volts					
Depth of Pump Intake ft. Pumps Capacity rated at gal./min.					
Type of pump: <input type="checkbox"/> 1 Submersible <input type="checkbox"/> 2 Turbine <input type="checkbox"/> 3 Jet <input type="checkbox"/> 4 Centrifugal <input type="checkbox"/> 5 Reciprocating <input type="checkbox"/> 6 Other					
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on month day year					
and this record is true to the best of my knowledge and belief, Kansas Water Well Contractor's License No.					
This Water Well Record was completed on month day year under the business name of <u>Carl Hayse Water Well Sew</u> by (signature) <u>Carl Hayse</u>					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM		TO	
		LITHOLOGIC LOG		LITHOLOGIC LOG	
		0 3		Top Soil	
		3 12		Rust Brown Clay	
		12 54		Sand	
		54 60		H.Br. Clay	
ELEVATION:					
Depth(s) Groundwater Encountered 1. <u>18</u> ft. 2. ft. 3. ft. 4. ft. (Use a second sheet if needed)					

OFFICE USE ONLY

T

26

R

17

EW

SEC

26

SW 1/4 SW 1/4 NW 1/4