

1 LOCATION OF WATER WELL
 County: kiowa Fraction NE 1/4 NE 1/4 SW 1/4 Section Number 3 Township Number T 27 S Range Number R 17 EW

Distance and direction from nearest town or city? 7 N 1/2 E of Haviland Street address of well if located within city?

2 WATER WELL OWNER: Jennines Thompson
 RR#, St. Address, Box #: RFD Haviland Kansas Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: RFD Haviland Kansas Application Number:

3 DEPTH OF COMPLETED WELL: 60 ft. Bore Hole Diameter: 8 3/4 in. to 60 ft., and _____ in. to _____ ft.

Well Water to be used as:
 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 7 Lawn and garden only 10 Observation well Pasture

Well's static water level: 27 ft. below land surface measured on _____ month _____ day _____ year
 Pump Test Data: Well water was 27 ft. after 1 hours pumping 3 gpm
 Est. Yield 20 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) Casing Joints: Glued Clamped _____
 Welded _____
 Threaded _____

Blank casing dia: 5 in. to 40 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight 1.5 lbs./ft. Wall thickness or gauge No. 200

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) _____
 12 None used (open hole)

Screen or Perforation Openings Are:
 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 11 None (open hole)

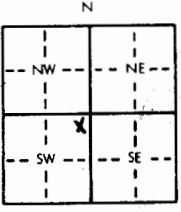
Screen-Perforation Dia: 5 in. to 60 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 40 ft. to 60 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 25 ft. to 60 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

5 GROUT MATERIAL: Neat cement 2 Cement grout 3 Bentonite 4 Other
 Grouted Intervals: From 0 ft. to 4 ft., From clay 4 ft. to 25 ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:
 1 Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy 7 Sewage lagoon 8 Feed yard 9 Livestock pens 10 Fuel storage 11 Fertilizer storage 12 Insecticide storage 13 Watertight sewer lines 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)
Cattle Paddock

Direction from well: All Sides How many feet: 4 ? Water Well Disinfected? Yes No _____
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No If yes, date sample _____
 was submitted _____ month _____ day _____ year: Pump Installed? Yes No _____
 If Yes: Pump Manufacturer's name: Windmill Model No. _____ HP _____ Volts _____
 Depth of Pump Intake: 42 ft. Pumps Capacity rated at 3 gal./min.
 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or 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. 224
 This Water Well Record was completed on _____ month _____ day _____ year under the business name of Carl Hayes Water Well Service by (signature) Carl Hayes

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

 FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG
0 4 Top Soil
4 8 Sand + Silt
8 16 Light Tan Clay
16 30 Sand
30 32 Clay
32 60 Sand + Gravel

ELEVATION:
 Depth(s) Groundwater Encountered 1. 27 ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)

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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY
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 SEC. 3
 NE 1/4 NE 1/4 SW 1/4