

LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: Kiowa	SW 1/4 NE 1/4 NW 1/4	27	T 27 S	R 18 EW

Distance and direction from nearest town or city? **5 miles north of Greensburg**

Street address of well if located within city?

WATER WELL OWNER: **Frank Schmidt**

Address: **Haviland, Kansas 67059**

Board of Agriculture, Division of Water Resources
Application Number:

DEPTH OF COMPLETED WELL: **60** ft. Bore Hole Diameter: **8 3/4** in. to **60** ft. and **60** in. to **60** 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 Observation well	Pasture
5 Public water supply	8 Air conditioning	11 Injection well		

Well's static water level: **38** ft. below land surface measured on **3** month **22** day **76** year

Pump Test Data: Well water was **38** ft. after **1** hours pumping **3** gpm

Est. Yield **15** gpm: Well water was **38** ft. after **1** hours pumping **3** gpm

TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Casing Joints: Glued <input checked="" type="checkbox"/> Clamped <input type="checkbox"/>
2 PVC	4 ABS	7 Fiberglass		Welded <input type="checkbox"/>
				Threaded <input type="checkbox"/>

Blank casing dia **5** in. to **40** ft. Dia **5** in. to **40** ft. Dia **5** in. to **40** ft. Dia **5** in. to **40** 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	3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)

Screen or Perforation Openings Are:

1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify)
			11 None (open hole)

Screen-Perforation Dia **5** in. to **60** ft. Dia **5** in. to **60** ft. Dia **5** in. to **60** ft. Dia **5** in. to **60** ft.

Screen-Perforated Intervals: From **40** ft. to **60** ft. From **40** ft. to **60** ft. From **40** ft. to **60** ft. From **40** ft. to **60** ft.

Gravel Pack Intervals: **no** From **40** ft. to **60** ft. From **40** ft. to **60** ft. From **40** ft. to **60** ft. From **40** ft. to **60** ft.

GROUT MATERIAL: **1 Neat cement** **2 Cement grout** **3 Bentonite** **4 Other**

Grouted Intervals: From **0** ft. to **10** ft. From **0** ft. to **10** ft. From **0** ft. to **10** ft. From **0** ft. to **10** ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Cess pool	7 Sewage lagoon	11 Fertilizer storage	14 Abandoned water well
2 Sewer lines	5 Seepage pit	8 Feed yard	12 Insecticide storage	15 Oil well/Gas well
3 Lateral lines	6 Pit privy	9 Livestock pens	13 Watertight sewer lines	Livestock passing

Direction from well **all around** How many feet **4** ? Water Well Disinfected? Yes **no** No **no**

Was a chemical/bacteriological sample submitted to Department? Yes **no** No **no** If yes, date sample

was submitted **no** month **no** day **no** year Pump Installed? Yes No

If Yes: Pump Manufacturer's name **Windmill** Model No. **no** HP **no** Volts **no**

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**

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on **3-22-76** **March** month **22** day **1976** 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 **March** month **22** day **1976** year under the business name of **CARL HAYSE WATER WELL SERVICE** by (signature) **Carl Hayse**

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	3	Top Soil			
	3	16	Sandy Clay			
	16	23	Heavy Clay (dark brown)			
	23	60	Gravel			

ELEVATION: Depth(s) Groundwater Encountered 1. **38** ft. 2. **38** ft. 3. **38** ft. 4. **38** 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
T
27
R
18
EWD
SEC.
27
1/4 SW
1/4 NE
1/4 NW