

1 LOCATION OF WATER WELL
 County: kiowa Fraction: SE 1/4 SE 1/4 SW 1/4 Section Number: 30 Township Number: T 27 S Range Number: R 19 EW
 Distance and direction from nearest town or city? 2.5 N. Mullinville Kans Street address of well if located within city?

2 WATER WELL OWNER: Nina Knight
 RR#, St. Address, Box #: Mullinville Kans Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Mullinville Kans Application Number:

3 DEPTH OF COMPLETED WELL: 80 ft. Bore Hole Diameter: 8 3/4 in. to _____ ft., and _____ in. to _____ ft.
 Well Water to be used as:
 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 11 Injection well
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well 12 Other (Specify below)

Well's static water level: 44 ft. below land surface measured on _____ month 10 day 26 year
 Pump Test Data: Well water was 46 ft. after 16 hours pumping 10 gpm
 Est. Yield 25 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing dia: 5 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight _____ lbs./ft. Wall thickness or gauge No. 200

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____
 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-Perforation Dia: 5 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Screen-Perforated Intervals: From 60 ft. to 80 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 Gravel Pack Intervals: From 45 ft. to 80 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

5 GROUT MATERIAL: Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grouted Intervals: From 4 ft. to 14 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below) _____
 13 Watertight sewer lines
 Direction from well: SW How many feet: 90 ? 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: Flint & Walling Model No. 5B28 HP 1 1/2 Volts 230
 Depth of Pump Intake: 70 ft. Pumps Capacity rated at: 10 1/2 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 (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month 6 day 10 year 76
 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 10 day 3 year 76
 name of Carl Haysse Water Well Serv. by (signature) Carl Haysse year under the business _____

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Top Soil			
2	15	Silt & Sand			
15	17	Clay			
17	25	Sand			
25	46	Clay			
46	80	GRAVEL			

ELEVATION:
 Depth(s) Groundwater Encountered 1. 46 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
T
87
R
19
EW
SEC
30
SE 1/4
SE 1/4
SW 1/4