

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Stanton</u>		<u>SE</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$	<u>28</u>	T <u>27</u> (5)	R <u>41</u> (EW)
Distance and direction from nearest town or city? <u>6 1/2 mi N. - 3 1/4 mi W. of Johnson, KS</u>			Street address of well if located within city?		
2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code : <u>Laurence Seyb</u> <u>Johnson, KS 67842</u>			Board of Agriculture, Division of Water Resources Application Number:		
3 DEPTH OF COMPLETED WELL. <u>300</u> ft. Bore Hole Diameter. <u>9"</u> in. to <u>300'</u> ft. and . . . in. to . . . ft.					
Well Water to be used as:					
5 Public water supply		8 Air conditioning		11 Injection well	
1 Domestic <input checked="" type="checkbox"/> Feedlot		6 Oil field water supply		9 Dewatering	
2 Irrigation		4 Industrial		12 Other (Specify below)	
7 Lawn and garden only		10 Observation well			
Well's static water level <u>X</u> <u>150</u> ft. below land surface measured on . . . <u>12</u> month . . . day <u>79</u> . . . year					
Pump Test Data : Well water was . . . ft. after . . . hours pumping . . . gpm					
Est. Yield : Well water was . . . ft. after . . . hours pumping . . . gpm					
4 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
2 PVC		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
				8 Concrete tile	
				9 Other (specify below)	
				Casing Joints: Glued . . . Clamped <input checked="" type="checkbox"/>	
				Welded . . .	
				Threaded . . .	
Blank casing dia . . . <u>5"</u> in. to <u>280'</u> ft. Dia . . . <u>5</u> in. to . . . ft. Dia . . . in. to . . . ft.					
Casing height above land surface. . . <u>1'</u> in. weight . . . lbs./ft. Wall thickness or gauge No. . . <u>262</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				8 RMP (SR)	
				9 ABS	
				10 Asbestos-cement	
				11 Other (specify)	
				12 None used (open hole)	
Screen or Perforation Openings Are:					
1 Continuous slot		3 Mill slot		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
				7 Torch cut	
				8 Saw cut	
				11 None (open hole)	
Screen-Perforation Dia. . . <u>5"</u> in. to <u>300'</u> ft. Dia . . . in. to . . . ft. Dia . . . in. to . . . ft.					
Screen-Perforated Intervals: <u>X</u> From . . . <u>300</u> ft. to . . . <u>280</u> ft. From . . . ft. to . . . ft. From . . . ft. to . . . ft.					
Gravel Pack Intervals: <u>X</u> From . . . <u>300</u> ft. to . . . <u>280</u> ft. From . . . ft. to . . . ft. From . . . ft. to . . . ft.					
5 GROUT MATERIAL:					
1 Neat cement		2 Cement grout		3 Bentonite	
4 Other					
Grouted Intervals: From <u>X</u> . . . <u>0</u> ft. to . . . <u>20</u> 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	
2 Sewer lines		5 Seepage pit		8 Feed yard	
3 Lateral lines		6 Pit privy		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)	
Direction from well . . . <u>SW</u> . . . How many feet . . . <u>50'</u> . . . ? Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>					
Was a chemical/bacteriological sample submitted to Department? <u>X</u> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, date sample was submitted . . . month . . . day . . . year: Pump Installed? Yes <input checked="" type="checkbox"/> No <input 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: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other <input checked="" type="checkbox"/>					
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 . . . <u>11th</u> month <u>28</u> day . . . <u>1979</u> year					
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . . <u>160</u>					
This Water Well Record was completed on . . . <u>12</u> month . . . <u>28</u> day . . . <u>1979</u> year under the business name of <u>Jim Smith Pump Service</u> by (signature) <u>James Ray Smith</u>					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG	
		0' 20' Clay			
		20' 40' Coarse sand			
		40' 65' Clay			
		65' 115' Sand			
		115' 140' Grey clay			
		140' 180' Coarse sand			
180' 300' Clay w/ fine sand					
ELEVATION:					
Depth(s) Groundwater Encountered 1. . . 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.					