

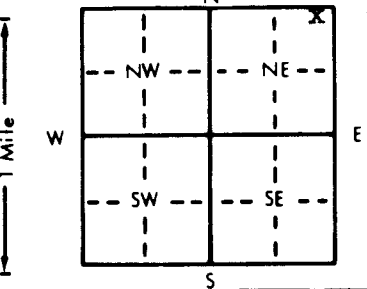
LOCATION OF WATER WELL: County: Kiowa	Fraction NE 1/4 NE 1/4 NE 1/4	Section Number 1	Township Number T 28 S	Range Number R 17 EW
---	---	----------------------------	----------------------------------	--------------------------------

Distance and direction from nearest town or city street address of well if located within city?

2 miles north 1 mile west of Haviland

WATER WELL OWNER: **Steve Bartlett**
 Board of Agriculture, Division of Water Resources
 Application Number: _____
 City, State, ZIP Code: **Haviland Kansas 67059**

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: **4** DEPTH OF COMPLETED WELL: **140** ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. **62** ft. 2. _____ ft. 3. _____ ft.



WELL'S STATIC WATER LEVEL: **62** ft. below land surface measured on mo/day/yr **6/13/89**
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield: **100** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: **8 3/4** in. to _____ ft., and _____ in. to _____ 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 Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No ; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes No _____

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 diameter: **5** in. to **120** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: **12** in., weight _____ lbs./ft. Wall thickness or gauge No. **SDR-26**

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 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
 _____ _____ _____ _____ _____

SCREEN-PERFORATED INTERVALS: From **120** ft. to **140** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **25** ft. to **140** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout intervals: From **4** ft. to **25** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
 _____ _____ _____ _____ _____
 Direction from well? **West** How many feet? **120**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Silt & sand			
3	54	Tan clay			
54	70	Sand			
70	74	Tan clay			
74	83	Sand			
83	84	Tan clay			
84	138	Sand & gravel			
138	140	Brown clay			

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **6/13/89** 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 (mo/day/yr) **8/18/89** under the business name of **Carl Hayse Water Well Service** by (signature) *Carl Hayse*

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, Bureau of Water Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY
T
R
EAW
SEC.
1/4
1/4
1/4