

1 LOCATION OF WATER WELL
 County: KLIOWA Fraction SE 1/4 NE 1/4 Section Number 7 Township Number T 28 S Range Number R 18 E/W

Distance and direction from nearest town or city? TWIN GREENSBURG Kansas Street address of well if located within city?

2 WATER WELL OWNER: Kenneth Lengar Board of Agriculture, Division of Water Resources
 RR#, St. Address, Box #: Greensburg Kansas Application Number:

3 DEPTH OF COMPLETED WELL: 100 ft. Bore Hole Diameter 8 3/4 in. to 100 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

Well's static water level: 58 ft. below land surface measured on _____ month _____ day _____ year

Pump Test Data: Well water was 58 ft. after _____ hours pumping _____ 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 80 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.

Casing height above land surface: 14 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) 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 80 ft. to 100 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

Gravel Pack Intervals: From 65 ft. to 100 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 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 NE How many feet 100 ? 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 + Wallina Model No 7B912 HP 3/4 Volts 230

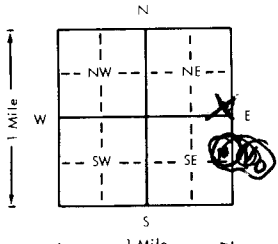
Depth of Pump Intake 84 ft. Pumps Capacity rated at 10 gal./min.

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 _____ day _____ year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 2249

This Water Well Record was completed on _____ month _____ day _____ year under the business name of Carl Hayse Water Well Serv by (signature) Carl Hayse

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



FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Top Soil			
2	6	Silt + Sand			
6	39	BR. Clay			
39	50	Tan Clay + Gyp			
50	106	Sand + GRAVEL			

ELEVATION: _____

Depth(s) Groundwater Encountered 1. 58 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.

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