

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Norton.</u>		<u>NW</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$	<u>36</u>	T <u>2</u> S	R <u>23</u> <u>W</u>
Distance and direction from nearest town or city? <u>1 East of Norton.</u>			Street address of well if located within city?		
2 WATER WELL OWNER: <u>Leroy Atwell</u>					
RR#, St. Address, Box #: <u>RR#3</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code: <u>Norton, KS 67454</u>			Application Number:		
3 DEPTH OF COMPLETED WELL: <u>69</u> ft. Bore Hole Diameter: <u>9</u> in. to <u>69</u> ft. and _____ in. to _____ ft.					
Well Water to be used as:		5 Public water supply	8 Air conditioning	11 Injection well	
<input checked="" type="radio"/> 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		
Well's static water level: <u>35</u> ft. below land surface measured on _____ month <u>12</u> day <u>80</u> year					
Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm					
Est. Yield <u>30</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm					
4 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	
<input checked="" type="radio"/> PVC		4 ABS	7 Fiberglass	Casing Joints: Glued <input checked="" type="checkbox"/> Clamped _____	
Blank casing dia <u>5</u> in. to <u>49</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.		Welded _____			
Casing height above land surface: <u>12</u> in., weight <u>236</u> lbs./ft. Wall thickness or gauge No <u>214</u>		Threaded _____			
TYPE OF SCREEN OR PERFORATION MATERIAL: <input checked="" type="radio"/> PVC					
1 Steel		3 Stainless steel	5 Fiberglass	8 RMP (SR)	
2 Brass		4 Galvanized steel	6 Concrete tile	9 ABS	
Screen or Perforation Openings Are:		5 Gauzed wrapped	<input checked="" type="radio"/> Saw cut		11 None (open hole)
1 Continuous slot		3 Mill slot	9 Drilled holes		
2 Louvered shutter		4 Key punched	10 Other (specify)		
Screen-Perforation Dia <u>5</u> in. to <u>20</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.		10 Asbestos-cement			
Screen-Perforated Intervals: From <u>49</u> ft. to <u>69</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.		11 Other (specify)			
Gravel Pack Intervals: From <u>15</u> ft. to <u>69</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.		12 None used (open hole)			
5 GROUT MATERIAL: <input checked="" type="radio"/> Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grouted Intervals: From <u>5</u> ft. to <u>15</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	10 Fuel storage	
<input checked="" type="radio"/> Sewer lines		5 Seepage pit	8 Feed yard	11 Fertilizer storage	
3 Lateral lines		6 Pit privy	9 Livestock pens	12 Insecticide storage	
Direction from well: <u>East</u> How many feet <u>200</u> ? Water Well Disinfected? Yes <input checked="" type="checkbox"/> No		13 Watertight sewer lines		14 Abandoned water well	
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, date sample was submitted _____ month _____ day _____ year		15 Oil well/Gas well		16 Other (specify below)	
If Yes: Pump Manufacturer's name <u>Aermotor</u> Model No. <u>SAHH</u> HP <u>114</u> Volts <u>220</u>		12 Insecticide storage			
Depth of Pump Intake <u>60</u> ft. Pumps Capacity rated at <u>7</u> gal./min.		13 Watertight sewer lines			
Type of pump: <input checked="" type="radio"/> Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other					
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="radio"/> constructed, <input type="radio"/> reconstructed, or <input type="radio"/> plugged under my jurisdiction and was completed on _____ month <u>13</u> day <u>80</u> year					
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>167</u>					
This Water Well Record was completed on _____ month <u>8</u> day <u>15</u> year <u>80</u> under the business name of <u>Fawcett Drilling</u> by (signature) <u>Hubert Fawcett</u>					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG	
		0 4 CLAY BLK.			
		4 29 CLAY TAN			
		29 31 SAND			
		31 37 CLAY BLUE.			
		37 67 SAND.			
		67 67 SHALE.			
ELEVATION:					
Depth(s) Groundwater Encountered 1. <u>35</u> 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.