

1] LOCATION OF WATER WELL:		Fraction	Pump Well No.	RSA USA 1212E	Township Number	Range Number
County: Summer		NW ¼ SE ¼ NE ¼	Section Number 3A		T 30 S R 4 EW	
Distance and direction from nearest town or city street address of well if located within city? <u>4½ mile west of North ½ mile of Conway Springs, KS.</u>						
2] WATER WELL OWNER:		City of Conway Springs		Well No.: 16		
RR#, St. Address, Box # :		City Building		Board of Agriculture, Division of Water Resources		
City, State, ZIP Code :		Conway Springs, Ks. 67031		Application Number: <u>20651</u>		
3] LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4] DEPTH OF COMPLETED WELL: 72 (GL) ft. ELEVATION:				
<p>A section box divided into four quadrants labeled NW, NE, SW, and SE. An 'X' is drawn in the center of the NE quadrant. The entire box is surrounded by dashed lines representing the section boundaries.</p>		Depth(s) Groundwater Encountered <u>1' 2"</u> ft. 2. .ft. 3. .ft.				
		WELL'S STATIC WATER LEVEL <u>2' 2"</u> ft. below land surface measured on mo/day/yr <u>6/16/89</u>				
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm				
		Est. Yield <u>400+</u> gpm; Well water was <u>46' 11"</u> ft. after <u>8</u> hours pumping <u>305</u> gpm				
		Bore Hole Diameter <u>12.36</u> in. to _____ ft., and _____ in. to _____ ft.				
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 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 <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, mo/day/yr sample was submitted (By Engineer) Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>						
5] TYPE OF BLANK CASING USED:						
1 Steel		3 RMP (SR)		5 Wrought iron		CASING JOINTS: Glued _____ Clamped _____
2 PVC		4 ABS		6 Asbestos-Cement		Welded <input checked="" type="checkbox"/>
				7 Fiberglass		Threaded _____
Blank casing diameter <u>12</u> in. to <u>S2</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.						
Casing height above land surface <u>3' 16"</u> in., weight <u>49.56</u> lbs./ft. Wall thickness or gauge No. <u>.375</u>						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel		3 Stainless steel		5 Fiberglass		7 PVC
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		8 Saw cut
2 Louvered shutter		4 Key punched		6 Wire wrapped		11 None (open hole)
				7 Torch cut <u>S2'</u>		9 Drilled holes
						10 Other (specify) _____
SCREEN-PERFORATED INTERVALS: From <u>72'</u> ft. to <u>S2'</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From <u>30'</u> ft. to <u>72'</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
6] GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <u>Cement grout w/ bentonite</u>						
Grout Intervals: From _____ ft. to _____ 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
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage
						13 Insecticide storage
						14 Abandoned water well
						15 Oil well/Gas well
						16 Other (specify below)
Direction from well?						
How many feet? <u>None within ¼ mile</u>						
FROM		TO		LITHOLOGIC LOG		PLUGGING INTERVALS
0		2		top soil		
2		18		fine sand		
18		25		fine-coarse sand w/some lt. brown clay		
25		27		lt. brown clay		
27		44		fine to coarse sand		
44		46		lt. brown clay; redbed		
46		72		fine to coarse sand w/some redbed layers		
72				redbed		
7] 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) <u>5/25/89</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>102.W</u> This Water Well Record was completed on (mo/day/yr) <u>6/11/90</u> under the business name of <u>Layne Western Co., Inc., Wichita, Ks.</u> by (signature) <u>[Signature]</u>						
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.						