

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sumner</u>		<u>SE ¼ NE ¼ SE ¼</u>	<u>4</u>	T <u>31</u> S	R <u>3</u> E/W
Distance and direction from nearest town or city street address of well if located within city? <u>¾ S. Conway Springs</u>					
2 WATER WELL OWNER: <u>Allen Harrant</u>					
RR#, St. Address, Box # : <u>Box 401</u>					
City, State, ZIP Code : <u>Conway Springs KS. 67031</u>					
Board of Agriculture, Division of Water Resources Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>56</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>26</u> ft. 2. <u>50</u> ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>24</u> ft. below land surface measured on mo/day/yr <u>8-13-92</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>10</u> in. to <u>56</u> 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 <u>7 Lawn and garden only</u> 10 Monitoring well			
		Was a chemical/bacteriological sample submitted to Department? Yes..... No <u>X</u>; If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes <u>X</u> No			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
2 <u>PVC</u>		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
Blank casing diameter <u>5</u> in. to <u>26</u> ft., Dia				8 Concrete tile	
Casing height above land surface <u>18</u> in., weight				9 Other (specify below)	
TYPE OF SCREEN OR PERFORATION MATERIAL:		<u>7 PVC</u>		CASING JOINTS: <u>Glued</u>	
1 Steel		3 Stainless steel		11 Welded	
2 Brass		4 Galvanized steel		12 Threaded	
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped		8 Saw cut	
1 Continuous slot		3 Mill slot		11 None (open hole)	
2 Louvered shutter		4 Key punched		9 Drilled holes	
		7 Torch cut		10 Other (specify)	
SCREEN-PERFORATED INTERVALS:		From <u>26</u> ft. to <u>56</u> ft., From _____ ft. to _____ ft.			
		From _____ ft. to _____ ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS:		From <u>20</u> ft. to <u>56</u> ft., From _____ ft. to _____ ft.			
		From _____ ft. to _____ ft., From _____ ft. to _____ ft.			
6 GROUT MATERIAL:					
1 Neat cement		2 Cement grout		3 Bentonite	
Grout Intervals: From <u>3</u> ft. to <u>20</u> ft., From _____ ft. to _____ ft.				4 Other <u>Bored-Hole Plug</u>	
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines		7 Pit privy	
2 Sewer lines		5 Cess pool		8 <u>Sewage lagoon</u>	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
Direction from well? <u>N.</u>				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below)	
How many feet? <u>1,500</u>					
FROM		TO		LITHOLOGIC LOG	
FROM		TO		PLUGGING INTERVALS	
0		2		Soil	
2		6		Red Clay	
6		56		Red Shale	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>8-13-92</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>395</u> This Water Well Record was completed on (mo/day/yr) <u>8-4-92</u> under the business name of <u>Craig Roberts Co.</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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					