

1 LOCATION OF WATER WELL		Fraction		Section Number		Township Number		Range Number	
County: <u>Harper</u>		C 1/4 SE 1/4 NE 1/4		21		T 31 S		R 8W EW	
Distance and direction from nearest town or city? <u>7 S, 1 E of Spivey, Kansas</u>					Street address of well if located within city?				
2 WATER WELL OWNER:		XXXXXX <u>Union Drilling Company</u>		<u>1819 11th Street</u>		Board of Agriculture, Division of Water Resources		Application Number: <u>Unknown</u>	
RR#, St. Address, Box # :		<u>Wichita, Kansas 67202</u>							
City, State, ZIP Code :									
3 DEPTH OF COMPLETED WELL		<u>80</u> ft. Bore Hole Diameter		<u>8</u> in. to <u>80</u> ft. and					
Well Water to be used as:		5 Public water supply		8 Air conditioning		11 Injection well			
1 Domestic 3 Feedlot		6 <u>Oil field water supply</u>		9 Dewatering		12 Other (Specify below)			
2 Irrigation 4 Industrial		7 Lawn and garden only		10 Observation well					
Well's static water level		<u>36</u> ft. below land surface measured on		<u>1</u> month <u>26</u> day		<u>1981</u> year			
Pump Test Data		Well water was		ft. after		hours pumping		gpm	
Est. Yield <u>X</u> <u>60</u> gpm:		Well water was		ft. after		hours pumping		gpm	
4 TYPE OF BLANK CASING USED:		5 Wrought iron		8 Concrete tile		Casing Joints: <u>Glued</u>		Clamped	
1 Steel		3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below)		Welded	
2 <u>PVC</u>		4 ABS		7 Fiberglass				Threaded	
Blank casing dia <u>5</u> in. to <u>60</u> ft. Dia									
Casing height above land surface <u>12</u> in. weight <u>2.8</u> lbs./ft. Wall thickness or gauge No <u>Sch. 40</u>									
TYPE OF SCREEN OR PERFORATION MATERIAL:		5 Fiberglass		7 <u>PVC</u>		10 Asbestos-cement			
1 Steel		3 Stainless steel		8 RMP (SR)		11 Other (specify)			
2 Brass		4 Galvanized steel		6 Concrete tile		9 ABS		12 None used (open hole)	
Screen or Perforation Openings Are:		5 Gauzed wrapped		8 <u>Saw cut</u>		11 None (open hole)			
1 Continuous slot		3 Mill slot		6 Wire wrapped		9 Drilled holes			
2 Louvered shutter		4 Key punched		7 Torch cut		10 Other (specify)			
Screen-Perforation Dia <u>5</u> in. to		ft. Dia		in. to		ft. Dia		in to	
Screen-Perforated Intervals:		From <u>60</u> ft. to <u>80</u> ft.		From		ft. to		ft. to	
Gravel Pack Intervals:		From <u>10</u> ft. to <u>80</u> ft.		From		ft. to		ft. to	
5 GROUT MATERIAL:		1 Neat cement		2 Cement grout		3 <u>Bentonite</u>		4 Other	
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft.		From		ft. to		ft. to		ft. to	
What is the nearest source of possible contamination:		1 Septic tank		4 Cess pool		7 Sewage lagoon		10 Fuel storage	
2 Sewer lines		5 Seepage pit		8 Feed yard		11 Fertilizer storage		14 Abandoned water well	
3 Lateral lines		6 Pit privy		9 Livestock pens		12 Insecticide storage		15 <u>Oil well/Gas well</u>	
Direction from well <u>East</u> How many feet <u>60</u>								16 Other (specify below)	
Was a chemical/bacteriological sample submitted to Department? Yes								? Water Well Disinfected? Yes <u>No</u>	
No								If yes, date sample	
was submitted		month		day		year		Pump installed? Yes <u>No</u>	
If Yes: Pump Manufacturer's name		Model No.		HP		Volts			
Depth of Pump Intake		ft.		Pumps Capacity rated at		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) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on <u>1</u> month <u>26</u> day <u>1981</u> year									
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>186</u>									
This Water Well Record was completed on <u>2</u> month <u>9</u> day <u>1981</u> year under the business name of <u>Kellys Water Well Service</u> by (signature) <u>Kelly Price</u>									
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM		TO		LITHOLOGIC LOG		FROM	
		0		35		Clay			
		35		80		Sand and Gravel			
ELEVATION: <u>Unknown</u>									
Depth(s) Groundwater Encountered		1. <u>36</u> ft.		2. ft.		3. ft.		4. ft.	
								(Use a second sheet if needed)	

OFFICE USE ONLY

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.