

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: <u>Morton</u>		<u>SW</u> 1/4 <u>SW</u> 1/4 <u>SW</u> 1/4	<u>6</u>	<u>T</u> <u>32</u> <u>S</u>	<u>R</u> <u>40</u> <u>EW</u>		
Distance and direction from nearest town or city? <u>3 E - 2 W N of Richfield, Ks.</u>			Street address of well if located within city?				
2 WATER WELL OWNER: <u>Don Dunn</u>							
RR#, St. Address, Box # : <u>N. Star Rt.</u>			Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : <u>Richfield, Ks. 67953</u>			Application Number:				
3 DEPTH OF COMPLETED WELL... <u>205</u> ... ft. Bore Hole Diameter... <u>9</u> ... in. to... <u>205</u> ... ft., and... in. to... ft.							
Well Water to be used as:							
<input checked="" type="checkbox"/> Domestic		3 Feedlot		5 Public water supply			
<input type="checkbox"/> 2 Irrigation		4 Industrial		6 Oil field water supply			
		7 Lawn and garden only		8 Air conditioning			
				9 Dewatering			
				10 Observation well			
				11 Injection well			
				12 Other (Specify below)			
Well's static water level <input checked="" type="checkbox"/> <u>126</u> ft. below land surface measured on <u>1</u> month <u>25</u> day <u>1980</u> year							
Pump Test Data : Well water was... ft. after... hours pumping... gpm							
Est. Yield <input checked="" type="checkbox"/> <u>40</u> gpm: Well water was... ft. after... hours pumping... gpm							
4 TYPE OF BLANK CASING USED:							
1 Steel		3 RMP (SR)		5 Wrought iron			
<input checked="" type="checkbox"/> 2 PVC		4 ABS		6 Asbestos-Cement			
				7 Fiberglass			
				8 Concrete tile			
				9 Other (specify below)			
				Casing Joints: Glued <input checked="" type="checkbox"/> Clamped			
				Welded			
				Threaded			
Blank casing dia <u>5"</u> in. to <u>165</u> ft., Dia <u>12-94</u> in. to... ft., Dia... in. to... ft.							
Casing height above land surface <u>12-94</u> in., weight <u>Not Known</u> lbs./ft. Wall thickness or gauge No <u>262 well</u>							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel		5 Fiberglass			
2 Brass		4 Galvanized steel		6 Concrete tile			
				7 Torch cut			
				8 RMP (SR)			
				9 ABS			
				10 Asbestos-cement			
				11 Other (specify)			
				12 None used (open hole)			
Screen or Perforation Openings Are:							
1 Continuous slot		<input checked="" type="checkbox"/> Mill slot		5 Gauzed wrapped			
2 Louvered shutter		4 Key punched		6 Wire wrapped			
				7 Torch cut			
				8 Saw cut			
				11 None (open hole)			
Screen-Perforation Dia <u>5</u> in. to <u>40</u> ft., Dia... in. to... ft., Dia... in. to... ft.							
Screen-Perforated Intervals: From <u>165</u> ft. to <u>205</u> ft., From... ft. to... ft., From... ft. to... ft.							
Gravel Pack Intervals: From <u>105</u> ft. to <u>205</u> ft., From... ft. to... ft., From... ft. to... ft.							
5 GROUT MATERIAL: <input checked="" type="checkbox"/> Neat cement 2 Cement grout 3 Bentonite 4 Other <u>Dirt Pack</u>							
Grouted Intervals: From <u>5</u> ft. to <u>20</u> ft., From... ft. to... ft., From... ft. to... ft.							
What is the nearest source of possible contamination:							
<input checked="" type="checkbox"/> 1 Septic tank		4 Cess pool		7 Sewage lagoon			
2 Sewer lines		5 Seepage pit		8 Feed yard			
3 Lateral lines		6 Pit privy		9 Livestock pens			
				10 Fuel storage			
				11 Fertilizer storage			
				12 Insecticide storage			
				13 Watertight sewer lines			
				14 Abandoned water well			
				15 Oil well/Gas well			
				16 Other (specify below)			
Direction from well <u>West</u> How many feet <u>100</u> ? Water Well Disinfected? Yes <u>XX</u> No <u>XX</u>							
Was a chemical/bacteriological sample submitted to Department? Yes <u>XX</u> No <u>XX</u> If yes, date sample was submitted... month... day... year: Pump Installed? Yes <u>XX</u> No <u>XX</u>							
If Yes: Pump Manufacturer's name <u>Goulds</u> Model No. <u>17EHS412</u> HP <u>1/2</u> Volts <u>230</u>							
Depth of Pump Intake... ft. Pumps Capacity rated at <u>7</u> GPM gal./min.							
Type of pump: <input checked="" type="checkbox"/> 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 <u>1st</u> month <u>25th</u> day <u>1980</u> year							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>160</u>							
This Water Well Record was completed on <u>5th</u> month <u>10th</u> day <u>1980</u> year under the business name of <u>JIM SMITH PUMP SERVICE</u> by (signature) <u>James Ray Smith</u>							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	30	Clay			
		30'	65'	Clay w/ fine sand			
		65'	95'	Clay			
		95'	130'	Sand			
		130'	145'	Clay			
		145'	160'	Rock—Red Combed			
		160'	163'	Sand			
163'	205'	Cemet Sand					
ELEVATION:							
Depth(s) Groundwater Encountered <input checked="" type="checkbox"/> 1. <u>126</u> ft. 2. <u>160</u> ft. 3. <u>163</u> 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.

OFFICE USE ONLY

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