

1 LOCATION OF WATER WELL  
 County: **Seward** Fraction **SE 1/4 SW 1/4 SE 1/4** Section Number **1** Township Number **T 33 S** Range Number **R 33 E W**  
 Distance and direction from nearest town or city? **From Liberal 10 North, 3 East, 1 North** Street address of well if located within city?

2 WATER WELL OWNER: **John Watson**  
 RR#, St. Address, Box #: **R. R. 2, Box 59** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: **Liberal, KS 67901** Application Number:

3 DEPTH OF COMPLETED WELL... **220** ft. Bore Hole Diameter... **10** in. to ... ft., and ... in. to ... ft.  
 Well Water to be used as:  
 **1 Domestic**  3 Feedlot  6 Oil field water supply  9 Dewatering  11 Injection well  
 2 Irrigation  4 Industrial  7 Lawn and garden only  10 Observation well  12 Other (Specify below)  
 Well's static water level ... **26** ft. below land surface measured on ... **July** month ... **16**, day ... **1980** year  
 Pump Test Data: Well water was ... ft. after ... hours pumping ... gpm  
 Est. Yield 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) Casing Joints: Glued  Clamped  
 **2 PVC**  4 ABS  7 Fiberglass  10 Asbestos-cement Welded  
 Blank casing dia ... **5** in. to ... **160** ft., Dia ... in. to ... ft., Dia ... in. to ... ft. Dia ... in. to ... ft. Dia ... in. to ... ft.  
 Casing height above land surface ... **12** in., weight ... lbs./ft. Wall thickness or gauge No **Schedule 40**  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel  3 Stainless steel  5 Fiberglass  **7 PVC**  10 Asbestos-cement  
 2 Brass  4 Galvanized steel  6 Concrete tile  9 ABS  11 Other (specify)  
 Screen or Perforation Openings Are:  
 1 Continuous slot  3 Mill slot  5 Gauzed wrapped  **8 Saw cut**  11 None (open hole)  
 2 Louvered shutter  4 Key punched  7 Torch cut  9 Drilled holes  10 Other (specify)  
 Screen-Perforation Dia ... **5** in. to ... **220** ft., Dia ... in. to ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft.  
 Screen-Perforated Intervals: From ... **160** ft. to ... **220** ft., From ... ft. to ... ft., From ... ft. to ... ft., From ... ft. to ... ft.  
 Gravel Pack Intervals: From ... ft. to ... ft., From ... ft. to ... ft., From ... ft. to ... ft., From ... ft. to ... ft.

5 GROUT MATERIAL:  1 Neat cement  2 Cement grout  **3 Bentonite**  4 Other  
 Grouted Intervals: From ... **0** ft. to ... **20** ft., From ... ft. to ... 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  14 Abandoned water well  
 2 Sewer lines  5 Seepage pit  8 Feed yard  11 Fertilizer storage  15 Oil well/Gas well  
 3 Lateral lines  6 Pit privy  9 Livestock pens  12 Insecticide storage  16 Other (specify below)  
 **Unknown**  
 Direction from well ... How many feet ... ? Water Well Disinfected? Yes  No  
 Was a chemical/bacteriological sample submitted to Department? Yes ... No  If yes, date sample was submitted ... month ... day ... year: Pump Installed? Yes ... No   
 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** constructed,  **2** reconstructed, or  **3** plugged under my jurisdiction and was completed on ... **July** month ... **16**, day ... **1980** year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **102**  
 This Water Well Record was completed on ... **August** month ... **14**, day ... **1980** year under the business name of **Layne-Western Company, Inc.** by (signature) *Steve Boyer*

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	18	Top soil			
18	120	Large gravel			
120	175	Fine sand			
175	177	Tan clay w/sand streaks			
177	222	F-M sand			
222	223	False red bed			
223	260	F-M sand			
260		Red bed			

ELEVATION:

Depth(s) Groundwater Encountered 1. ... 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.

OFFICE USE ONLY  
T  
R  
E  
SEC.  
SE 1/4 SW 1/4 SE 1/4