

LOCATION OF WATER WELL		Fraction	City Levant		Section Number	Township Number		Range Number	
County: Thomas		$\frac{1}{4}$	$\frac{1}{4}$	SW	$\frac{1}{4}$	2	T	8	S
Distance and direction from nearest town or city?					Street address of well if located within city? City Limits				

WATER WELL OWNER: **Ernie Seemann**

R#, St. Address, Box # : _____

City, State, ZIP Code : **Levant Kansas**

Board of Agriculture, Division of Water Resources
Application Number: _____

DEPTH OF COMPLETED WELL... **220** ft. Bore Hole Diameter... **9** in. to **220** ft., and _____ in. to _____ ft.

Well Water to be used as:

1 Domestic	3 Feedlot	5 Public water supply	8 Air conditioning	11 Injection well
2 Irrigation	4 Industrial	6 Oil field water supply	9 Dewatering	12 Other (Specify below)
		7 Lawn and garden only	10 Observation well	

Well's static water level... **105** ft. below land surface measured on _____ month **12**, day **78** year

Pump Test Data : Well water was _____ ft. after _____ hours pumping _____ gpm

St. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	Casing Joints: <u>Glued</u> _____ Clamped _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass		Threaded _____

Blank casing dia... **5** in. to **210** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface... **12** in., weight _____ lbs./ft. Wall thickness or gauge No. **188**

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	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	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify)	

Screen-Perforation Dia... **5** in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Screen-Perforated Intervals: From... **210** ft. to **220** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

Travel Pack Intervals: From... **20** ft. to **220** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GROUT MATERIAL:

1 Neat cement	2 Cement grout	3 Bentonite	4 Other
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Grouted Intervals: From... **0** ft. to **20** 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)
			13 Watertight sewer lines	none

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 submitted _____ month _____ day _____ year: Pump Installed? Yes ☒ No _____

Yes: Pump Manufacturer's name **Goulds** Model No. **10BJ10412** HP **1** Volts **230**

Depth of Pump Intake **189** ft. Pumps Capacity rated at _____ gal./min.

Type of pump:

1 Submersible	2 Turbine	3 Jet	4 Centrifugal	5 Reciprocating	6 Other
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CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month **12** day **78** year.

and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **214**

This Water Well Record was completed on _____ month **25** day **80** year under the business name of **BLUE JAY DRILLING CO. INC** by (signature) *Marlyn Hall*

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	135	top soil			
		135	155	fine sand sandy clay			
		155	175	sandy clay sand stone			
		175	195	sandy clay			
		175	220	sandy clay gravel			
	220	222	ochre shale				

ELEVATION: **upland**

Depth(s) Groundwater Encountered 1. **105** 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.