

1	LOCATION OF WATER WELL: County: ROOKS	Fraction SW ¼ SW ¼ SW ¼	Section Number 24	Township Number T 10 S	Range Number R 20 E 1
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Distance and direction from nearest town or city street address of well if located within city?
5 miles South ~~of~~ and 4 miles West of Zurich KS

2	WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	SUTOR RANCH 630 AA RD ZURICH KS 67663	Board of Agriculture, Division of Water Resources Application Number:
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3	LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF COMPLETED WELL 65 ft. ELEVATION:
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Depth(s) Groundwater Encountered 1. **45** ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL **45** ft. below land surface measured on mo/day/yr ~~9~~ **30** ~~04~~

Pump test data: Well water was ft. after hours pumping gpm

Est. Yield **30** gpm: Well water was ft. after hours pumping gpm

WELL WATER TO BE USED AS:

<input checked="" type="checkbox"/> 1 Domestic	<input type="checkbox"/> 3 Feedlot	<input type="checkbox"/> 6 Oil field water supply	<input type="checkbox"/> 9 Dewatering	<input type="checkbox"/> 12 Other (Specify below)
<input type="checkbox"/> 2 Irrigation	<input type="checkbox"/> 4 Industrial	<input type="checkbox"/> 7 Domestic (lawn & garden)	<input type="checkbox"/> 10 Monitoring well	

5 Public water supply 8 Air conditioning 11 Injection well

Was a chemical/bacteriological sample submitted to Department? Yes No **XX**; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes No **XX**

5	TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued XX Clamped
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<input type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 RMP (SR)	<input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 9 Other (specify below)	Welded
<input checked="" type="checkbox"/> 2 PVC	<input type="checkbox"/> 4 ABS	<input type="checkbox"/> 7 Fiberglass		Threaded

Blank casing diameter **5** in. to **45** ft., Dia in. to ft., Dia in. to

Casing height above land surface **18** in., weight **160** lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL:			<input checked="" type="checkbox"/> 2 PVC	<input type="checkbox"/> 10 Asbestos-Cement
<input type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 Stainless Steel	<input type="checkbox"/> 5 Fiberglass	<input type="checkbox"/> 8 RMP (SR)	<input type="checkbox"/> 11 Other (Specify)
<input type="checkbox"/> 2 Brass	<input type="checkbox"/> 4 Galvanized Steel	<input type="checkbox"/> 6 Concrete tile	<input type="checkbox"/> 9 ABS	<input type="checkbox"/> 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

<input type="checkbox"/> 1 Continuous slot	<input checked="" type="checkbox"/> Mill slot	<input type="checkbox"/> 5 Gauzed wrapped	<input type="checkbox"/> 8 Saw cut	<input type="checkbox"/> 11 None (open hole)
<input type="checkbox"/> 2 Louvered shutter	<input type="checkbox"/> 4 Key punched	<input type="checkbox"/> 6 Wire wrapped	<input type="checkbox"/> 9 Drilled holes	
		<input type="checkbox"/> 7 Torch cut	<input type="checkbox"/> 10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From **45** ft. to **65** ft., From ft. to ft., From ft. to

GRAVEL PACK INTERVALS: From **45** ft. to **65** ft., From ft. to ft., From ft. to

6	GROUT MATERIAL:	1 Neat cement	2 Cement grout	<input checked="" type="checkbox"/> Bentonite	4 Other
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Grout Intervals: From **0** ft. to **20** ft., From ft. to ft., From ft. to

What is the nearest source of possible contamination:

<input type="checkbox"/> 1 Septic tank	<input type="checkbox"/> 4 Lateral lines	<input type="checkbox"/> 7 Pit privy	<input type="checkbox"/> 10 Livestock pens	<input type="checkbox"/> 14 Abandoned water well
<input type="checkbox"/> 2 Sewer lines	<input type="checkbox"/> 5 Cess pool	<input type="checkbox"/> 8 Sewage lagoon	<input type="checkbox"/> 11 Fuel storage	<input type="checkbox"/> 15 Oil well/Gas well
<input type="checkbox"/> 3 Watertight sewer lines	<input type="checkbox"/> 6 Seepage pit	<input type="checkbox"/> 9 Feedyard	<input type="checkbox"/> 12 Fertilizer storage	<input type="checkbox"/> 16 Other (specify below)
			<input type="checkbox"/> 13 Insecticide storage	

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	SURFACE CLAY			
10	40	HARD YELLOW CLAY			
40	50	FINE SAND			
50	64	MED TO LARGE SAND			
64	65	BLUE SHALE			

RECEIVED

NOV 01 2004

BUREAU OF WATER

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 9-30-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 444 This Water Well Record was completed on (mo/day/yr) 9-30-04 under the business name of ANDY ANDERSON DRILLING by (signature) <i>Andy Anderson</i>
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