

LOCATION OF WATER WELL: County: Morris Fraction: SW 1/4 NE 1/4 NW 1/4 Section Number: 5 Township Number: T 14 S Range Number: R 6 EW

Distance and direction from nearest town or city? IN skiddy Street address of well if located within city? NONE

WATER WELL OWNER: Dolly Anderson Board of Agriculture, Division of Water Resources
 Address: Rt 1 White City Application Number:

DEPTH OF COMPLETED WELL: 58 ft. Bore Hole Diameter: 8 in. to 14 ft. and 6 1/4 in. to 58 ft.

Well Water to be used as:
 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well

Well's static water level: 16 ft. below land surface measured on 2nd month 20 day 1981 year

Pump Test Data: NONE Well water was _____ ft. after _____ hours pumping _____ gpm
 Test Yield: 20 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
 2 PVC 4 ABS 7 Fiberglass _____ Threaded _____

Blank casing dia: 5 in. to 18 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 18 in., weight _____ lbs./ft. Wall thickness or gauge No. 214

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 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:
 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 10 Other (specify) _____

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

Screen-Perforated Intervals:
 From 18 ft. to 58 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

Gravel Pack Intervals:
 From 13 ft. to 58 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grouted Intervals: From 3 ft. to 13 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 11 Fertilizer storage 15 Oil well/Gas well
 2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 16 Other (specify below)
 3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines

Direction from well: West 150ft How many feet: 150 ? 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
 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

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 2nd month 20 day 1981 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 210
 This Water Well Record was completed on 4th month 20 day 1981 year under the business name of _____ by (signature) JOE ZINN

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	4	Topsoil Blk	43	53	LIME
	4	18	Shale Yel	53	58	Shale Black
	18	19	Gravel			
	19	22	LIME & Blue Flint			
	22	25	Shale Gray			
	25	33	Flint in LIME			
	33	35	Shale Blue			
	35	38	LIME wht.			
	38	40	Shale Blue			
	40	42	LIME Gray			
42	43	Shale Blue				

DEPTH OF GROUNDWATER ENCOUNTERED: 1. 18 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
14
R
6
EW
SEC.
50 1/4 NE 1/4 NW 1/4