

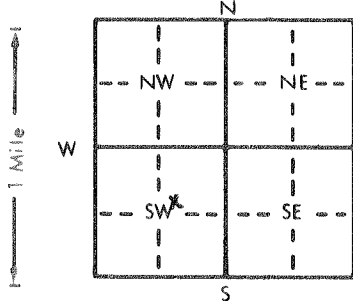
1 LOCATION OF WATER WELL: County: <u>Morris</u>	Fraction <u>SW 1/4 NE 1/4 SW 1/4</u>	Section Number <u>32</u>	Township Number T <u>15</u> S	Range Number R <u>9</u> <u>EW</u>
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Distance and direction from nearest town or city street address of well if located within city?

2 N 1 E 1/2 N of Council Grove (START @ Drive in theater

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	<u>Joe Buchanan</u> <u>RR1 Council Grove, KS</u>	Board of Agriculture, Division of Water Resource Application Number:
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>70</u> ft. ELEVATION: <u>1330</u>
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Depth(s) Groundwater Encountered 1. 18 ft. 2. 18 ft. 3. 18 ft.

WELL'S STATIC WATER LEVEL 15 ft. below land surface measured on mo/day/yr Sep 17 83

Pump test data: Well water was 3 ft. after 3 hours pumping 3 gpm

Est. Yield 3 gpm: Well water was 3 ft. after 3 hours pumping 3 gpm

Bore Hole Diameter 8 in. to 15 ft., and 6 1/4 in. to 70 ft.

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 Lawn and garden only	<input type="checkbox"/> 10 Observation well	

Was a chemical/bacteriological sample submitted to Department? Yes X No ; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped <u> </u>
<input checked="" type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 RMP (SR)	<input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 9 Other (specify below)
<input checked="" type="checkbox"/> 2 PVC	<input type="checkbox"/> 4 ABS	<input type="checkbox"/> 7 Fiberglass	<input type="checkbox"/> 10 Asbestos-cement

Blank casing diameter 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. SDR-26

TYPE OF SCREEN OR PERFORATION MATERIAL:	<input checked="" type="checkbox"/> 7 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"/> 2 Brass	<input type="checkbox"/> 4 Galvanized steel	<input type="checkbox"/> 6 Concrete tile
	<input type="checkbox"/> 8 RMP (SR)	<input type="checkbox"/> 9 ABS
	<input type="checkbox"/> 11 Other (specify)	<input type="checkbox"/> 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:	<input checked="" type="checkbox"/> 8 Saw cut	<input type="checkbox"/> 11 None (open hole)
<input type="checkbox"/> 1 Continuous slot	<input type="checkbox"/> 3 Mill slot	<input type="checkbox"/> 6 Wire wrapped
<input type="checkbox"/> 2 Louvered shutter	<input type="checkbox"/> 4 Key punched	<input type="checkbox"/> 7 Torch cut
	<input type="checkbox"/> 10 Other (specify)	

SCREEN-PERFORATED INTERVALS:	From <u>18</u> ft. to <u>70</u> ft.	From <u> </u> ft. to <u> </u> ft.	From <u> </u> ft. to <u> </u> ft.
GRAVEL PACK INTERVALS:	From <u> </u> ft. to <u> </u> ft.	From <u> </u> ft. to <u> </u> ft.	From <u> </u> ft. to <u> </u> ft.

6 GROUT MATERIAL:	<input checked="" type="checkbox"/> 1 Neat cement	<input type="checkbox"/> 2 Cement grout	<input type="checkbox"/> 3 Bentonite	<input type="checkbox"/> 4 Other
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Grout Intervals: From 3 ft. to 13 ft., From ft. to ft., From ft. to ft.

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

Direction from well? West How many feet? 100

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Topsoil	46	48	Lime Lite
2	7	Clay Brn	48	50	Shale Gray
7	13	Alluvium	50	53	Lime & Flint 3 mile
13-14	14	Lime Yel	53	68	Shale Lite Gray
14	15	Shale Yel	68	70	Furston
15	16	Lime Lite			
16	18	Shale Brn			
18	19	Fractured Lime			
19	21	Shale Gray			
21	22	Lime			
22	25	Shale Gray			
25	27	Lime Lite TAN			
27	31	Red Rock			
31	36	Lime & Flint Schroyer			
36	46	Shale Dark Gray			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> (1) constructed, <input type="checkbox"/> (2) reconstructed, or <input type="checkbox"/> (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>Sep 17 83</u>	and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>218</u>	This Water Well Record was completed on (mo/day/yr) <u>JUNE 17 84</u>
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under the business name of Zinn Water Well Drilling by (signature) Joseph A. Zinn

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, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.