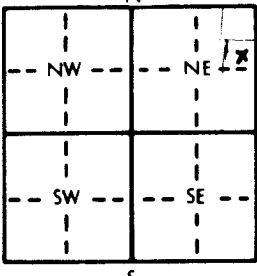


1 LOCATION OF WATER WELL: County: Morris Fraction: SE 1/4 NE 1/4 NE 1/4 Section Number: 7 Township Number: T 16 S Range Number: R 6 EW

Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: Ken Johnson
 RR#, St. Address, Box #: 6030 Independence
 City, State, ZIP Code: Wichita, KS 67219
 Board of Agriculture, Division of Water Resources
 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL: 135 ft. ELEVATION: 103 ft.

Depth(s) Groundwater Encountered 1. 103 ft. 2. 85 ft. 3. 05 ft.
 WELL'S STATIC WATER LEVEL: 85 ft. below land surface measured on mo/day/yr Jan 17 92
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 20+ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: 8 in. to 26 ft. and 6 7/8 in. to 135 ft.
 WELL WATER TO BE USED AS:
 Domestic Feedlot Oil field water supply Dewatering Other (Specify below)
 Irrigation Industrial Lawn and garden only Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing diameter: 5 in. to 85 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:
 Steel Stainless steel Fiberglass RMP (SR) Other (specify) _____
 Brass Galvanized steel Concrete tile ABS None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 Continuous slot Mill slot Wire wrapped Saw cut None (open hole)
 Louvered shutter Key punched Torch cut Drilled holes Other (specify) _____

SCREEN-PERFORATED INTERVALS: From 85 ft. to 135 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From NONE ft. to _____ ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other _____
 Grout Intervals: From 3 ft. to 26 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 Septic tank Lateral lines Pit privy Livestock pens Abandoned water well
 Sewer lines Cess pool Sewage lagoon Fuel storage Oil well/Gas well
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Other (specify below)
 Insecticide storage _____
 Direction from well? West - Hand Dug 110' How many feet? 60

FROM	TO	LITHOLOGIC LGG	FROM	TO	PLUGGING INTERVALS
0	3	Top soil	107	114	Shale Gray
3	6	LIME Yel	114	135	LIME-hd TAN Fb. Riley
6	15	Red Rock			
15	18	Shale Green			
18	33	LIME white Frac Dry			
33	35	Shale Yel			
35	48	LIME Yel			
48	53	Shale Yel			
53	57	LIME Gray			
57	63	Shale Yel			
63	72	LIME & Shale Yel			
72	91	Red Rock			
91	95	Shale-Olive Green			
95	103	LIME white			
103	107	LIME white-Frac Wet			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) JAN 17 92 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 (mo/day/yr) JAN 17 92 under the business name of ZINN Water Well Dng 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, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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