

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Morris</u>		<u>NE 1/4 SE 1/4 SE 1/4</u>	<u>East 1/2 8</u>	<u>T 16 S</u>	<u>R 8 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>2 1/2 miles West & 1 mile North of Council Grove - I-25 Council Grove, Lake</u>					
2 WATER WELL OWNER: <u>Melvin Storm</u> <u>James Hoy</u>					
RR#, St. Address, Box #: <u>2026 Fawcett Dr.</u> <u>938 Road 130</u>					
City, State, ZIP Code: <u>Emporia, KS 66801</u> <u>Emporia, KS 66801</u>					
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: <u>140</u> ft. ELEVATION: <u>140</u> ft.			
		Depth(s) Groundwater Encountered 1. <u>125</u> ft. 2. <u>125</u> ft. 3. <u>125</u> ft.			
		WELL'S STATIC WATER LEVEL <u>60</u> ft. below land surface measured on mo/day/yr <u>JUN 22 02</u>			
		Pump test data: Well water was <u>3</u> gpm. Well water was <u>3</u> gpm. Well water was <u>3</u> gpm.			
		Bore Hole Diameter <u>7 1/2</u> in. to <u>140</u> ft. and <u>140</u> ft. to <u>140</u> 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 Monitoring well					
Was a chemical/bacteriological sample submitted to Department? Yes <u>X</u> No <u>X</u> If yes, mo/day/yr sample was sub- mitted					
Water Well Disinfected? Yes <u>X</u> No <u>X</u>					
5 TYPE OF BLANK CASING USED:					
<input checked="" type="checkbox"/> 1 Steel <input type="checkbox"/> 3 RMP (SR) <input type="checkbox"/> 5 Wrought iron <input type="checkbox"/> 8 Concrete tile CASING JOINTS: Glued <u>X</u> Clamped <u>X</u>					
<input checked="" type="checkbox"/> 2 PVC <input type="checkbox"/> 4 ABS <input type="checkbox"/> 6 Asbestos-Cement <input type="checkbox"/> 9 Other (specify below) Welded <u>X</u> Threaded <u>X</u>					
Blank casing diameter <u>18</u> in. to <u>18</u> ft. Dia. <u>18</u> in. to <u>18</u> ft. Dia. <u>18</u> in. to <u>18</u> ft. Dia. <u>18</u> in. to <u>18</u> ft. Dia.					
Casing height above land surface <u>18</u> in. weight <u>18</u> lbs./ft. Wall thickness or gauge No. <u>SDR-26</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
<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"/> 10 Asbestos-cement					
<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"/> 11 Other (specify) <input type="checkbox"/> 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
<input type="checkbox"/> 1 Continuous slot <input type="checkbox"/> 3 Mill slot <input type="checkbox"/> 5 Gauzed wrapped <input checked="" 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 <u>60</u> ft. to <u>140</u> ft. From <u>60</u> ft. to <u>140</u> ft. From <u>60</u> ft. to <u>140</u> ft. From <u>60</u> ft. to <u>140</u> ft.					
GRAVEL PACK INTERVALS: From <u>NONE</u> ft. to <u>NONE</u> ft. From <u>NONE</u> ft. to <u>NONE</u> ft. From <u>NONE</u> ft. to <u>NONE</u> ft. From <u>NONE</u> ft. to <u>NONE</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					
Grout Intervals: From <u>3</u> ft. to <u>27</u> ft. From <u>3</u> ft. to <u>27</u> ft. From <u>3</u> ft. to <u>27</u> ft. From <u>3</u> ft. to <u>27</u> ft.					
What is the nearest source of possible contamination:					
<input type="checkbox"/> 1 Septic tank <input checked="" 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? <u>70</u> How many feet?					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	alluvium	106	119	LIME Lite & Blue Flint
3	14	LIME TAN	119	125	Shale Lite Gray
14	17	Shale Yel	125	132	LIME Lite
17	25	Shale TAN	132	133	LIME Frac.
25	30	LIME TAN	133	140	LIME Lite Gray
30	35	Shale Green			
35	40	Red Rock			
40	44	Shale Gray			
44	48	LIME Frac. Gray			
48	62	Shale Lite Gray			
62	69	LIME Gray			
69	87	Shale Green & Gray			
87	96	Red Rock			
96	100	LIME TAN			
100	106	Shale Gray			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>JUN 22 02</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>JUN 24 02</u>					
under the business name of <u>Zinn Water Well Drilling</u> by (signature) <u>Joseph A. Zinn</u>					
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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					