

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Morris</u>		<u>SE 1/4 SE 1/4 SE 1/4</u>	<u>E 1/2 of 7</u>	T <u>16</u> S	R <u>8</u> <u>EN</u>
Distance and direction from nearest town or city street address of well if located within city? <u>4 West 1/2 N 1/2 W 1/2 N of Council Grove Lot 3-5</u>					
2 WATER WELL OWNER: <u>Darnel Bryant</u>					
RR#, St. Address, Box # : _____ Board of Agriculture, Division of Water Resources					
City, State, ZIP Code : <u>Council Grove</u> Application Number: _____					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>90</u> ft. ELEVATION: _____			
		Depth(s) Groundwater Encountered 1. <u>32</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>32</u> ft. below land surface measured on mo/day/yr <u>June 25 82</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>1.5</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>8</u> in. to _____ ft., and _____ in. to _____ ft.			
		WELL WATER TO BE USED AS:			
		☒ 1 Domestic ☐ 3 Feedlot ☐ 6 Oil field water supply ☐ 9 Dewatering ☐ 12 Other (Specify below)			
		☐ 2 Irrigation ☐ 4 Industrial ☐ 7 Lawn and garden only ☐ 10 Observation well			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>Yes</u> If yes, mo/day/yr sample was submitted _____			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: <u>Glued</u> _____ Clamped _____			
☒ 1 Steel ☐ 3 RMP (SR) ☒ 2 PVC ☐ 4 ABS		☐ 5 Wrought iron ☐ 8 Concrete tile ☐ 6 Asbestos-Cement ☐ 9 Other (specify below)			
Blank casing diameter <u>5</u> in. to <u>32</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface <u>18</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>214</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:		☒ 7 PVC			
☐ 1 Steel ☐ 3 Stainless steel ☐ 5 Fiberglass ☐ 2 Brass ☐ 4 Galvanized steel ☐ 6 Concrete tile		☐ 8 RMP (SR) ☐ 11 Other (specify) _____ ☐ 12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:		☐ 5 Gauzed wrapped ☐ 8 Saw cut ☐ 11 None (open hole) ☐ 1 Continuous slot ☐ 3 Mill slot ☐ 6 Wire wrapped ☐ 9 Drilled holes ☐ 2 Louvered shutter ☐ 4 Key punched ☐ 7 Torch cut ☐ 10 Other (specify) _____			
SCREEN-PERFORATED INTERVALS: From <u>32</u> ft. to <u>90</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>NONE</u> ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL:		☐ 1 Neat cement ☒ 2 Cement grout ☐ 3 Bentonite ☐ 4 Other _____			
Grout Intervals: From <u>3</u> ft. to <u>13</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:		☐ 10 Livestock pens ☐ 14 Abandoned water well ☐ 11 Fuel storage ☐ 15 Oil well/Gas well ☐ 12 Fertilizer storage ☐ 16 Other (specify below) <u>NE & SE</u> ☐ 13 Insecticide storage ☐ 17 _____			
☐ 1 Septic tank ☐ 4 Lateral lines ☒ 7 Pit privy ☐ 2 Sewer lines ☐ 5 Cess pool ☐ 8 Sewage lagoon ☐ 3 Watertight sewer lines ☐ 6 Seepage pit ☐ 9 Feedyard		How many feet? <u>50</u>			
Direction from well? _____					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Top soil	01		
3	19	LIME & Flint	22 Florence		
19	22	Shale Blue	19		
22	27	LIME	20		
27	32	Red Rock	19		
32	35	LIME like	20		
35	53	Shale	19 Henryline		
53	56	LIME white	20		
56	72	LIME Gray	20		
72	74	Shale Green	19		
74	77	Red Rock	19		
77	94	LIME & Flint	22 Wretford		
94	96	Flint	33		
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>June 25 82</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>March 28 83</u>					
under the business name of <u>Zinn Water Well Dring</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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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SEC.

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SE 1/4

SE 1/4

SE 1/4

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