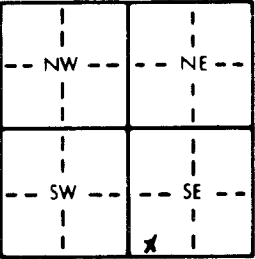


| | | | | | |
|--|--|--|----------------|----------------------|----------------------|
| 1 LOCATION OF WATER WELL: | | Fraction | Section Number | Township Number | Range Number |
| County: <u>Morris</u> | | <u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ | <u>8</u> | <u>T 16</u> <u>S</u> | <u>R 9</u> <u>EW</u> |
| Distance and direction from nearest town or city street address of well if located within city? <u>From Sect. of 1775 56 in Council Grove, go 3 mile East on 56</u> | | | | | |
| 2 WATER WELL OWNER: | | Board of Agriculture, Division of Water Resources | | | |
| RR#, St. Address, Box # | | Application Number: | | | |
| City, State, ZIP Code | | | | | |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | | 4 DEPTH OF COMPLETED WELL: <u>70</u> ft. ELEVATION: <u>40</u> ft. | | | |
|  | | Depth(s) Groundwater Encountered 1. <u>19</u> ft. 2. <u>40</u> ft. 3. <u>40</u> ft. | | | |
| | | WELL'S STATIC WATER LEVEL <u>19</u> ft. below land surface measured on mo/day/yr <u>Apr 12 90</u> | | | |
| | | Pump test data: Well water was <u>20+</u> gpm Well water was <u>23</u> ft. after <u>6 7/8</u> hours pumping <u>70</u> gpm | | | |
| | | Est. Yield <u>20+</u> gpm Well water was <u>23</u> ft. after <u>6 7/8</u> hours pumping <u>70</u> gpm | | | |
| | | Bore Hole Diameter <u>8</u> in. to <u>23</u> ft. and <u>6 7/8</u> in. to <u>70</u> ft. | | | |
| | | WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well | | | |
| | | <input checked="" type="radio"/> Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) | | | |
| | | 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well | | | |
| | | Was a chemical/bacteriological sample submitted to Department? Yes <u>No</u> <u>X</u> If yes, mo/day/yr sample was submitted | | | |
| | | Water Well Disinfected? <u>Yes</u> <u>No</u> | | | |
| 5 TYPE OF BLANK CASING USED: | | CASING JOINTS: Glued <u>X</u> Clamped <u>Welded</u> <u>Threaded</u> | | | |
| 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) | | | | | |
| <input checked="" type="radio"/> PVC 4 ABS 7 Fiberglass | | | | | |
| Blank casing diameter <u>5</u> in. to <u>40</u> ft. Dia <u>18</u> in. weight <u>40</u> lbs./ft. Wall thickness or gauge No. <u>SPR-26</u> | | | | | |
| Casing height above land surface <u>18</u> in. | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | 10 Asbestos-cement 11 Other (specify) 12 None used (open hole) | | | |
| 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) | | | | | |
| 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | 5 Gauzed wrapped <input checked="" type="radio"/> 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>40</u> ft. to <u>70</u> ft. | | | | | |
| GRAVEL PACK INTERVALS: From <u>NONE</u> ft. to <u>70</u> ft. | | | | | |
| 6 GROUT MATERIAL: <input checked="" type="radio"/> Neat cement 2 Cement grout 3 Bentonite 4 Other | | | | | |
| Grout Intervals: From <u>40</u> ft. to <u>70</u> ft. | | | | | |
| What is the nearest source of possible contamination: | | 10 Livestock pens 14 Abandoned water well | | | |
| 1 Septic tank <input checked="" type="radio"/> Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well | | | | | |
| 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) | | | | | |
| 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage | | | | | |
| Direction from well? <u>West</u> | | How many feet? <u>100</u> | | | |
| FROM TO LITHOLOGIC LOG | | FROM TO PLUGGING INTERVALS | | | |
| 0 2 Top Soil | | | | | |
| 2 5 Clay Brn | | | | | |
| 5 6 Lime Lite | | | | | |
| 6 10 Red Rock | | | | | |
| 10 16 Lime Lite | | | | | |
| 16 40 Lime Soft | | | | | |
| 40 44 Crevice | | | | | |
| 44 54 Lime / Blue Flint | | | | | |
| 54 60 Shale Green | | | | | |
| 60 63 Red Rock | | | | | |
| 63 70 Lime TAN | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="radio"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>Apr 12 90</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>Apr 30 90</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 answer. 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. | | | | | |