

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: MORRIS		SW 1/4 NE 1/4 SW 1/4	8	T 17 S	R 8 EW
Distance and direction from nearest town or city street address of well if located within city? APPROX 3 M S OF COUNCIL GROVE HI 177 - 3W - 24S - CO. RD 500					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # :		Application Number:			
City, State, ZIP Code :		COUNCIL GROVE KS 66846			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 44 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. 16 ft. 2. 29 ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL 16 ft. below land surface measured on mo/day/yr 03-03-89			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield 25+ gpm. Well water was _____ ft. after _____ hours pumping _____ gpm			
		* Core Hole Diameter 12 1/2 in. to 17 in. and 8 5/8 in. to _____ in.			
		WELL WATER TO BE USED AS:			
		<input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Lawn and garden only <input type="checkbox"/> Monitoring well LIVE STOCK			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
2 PVC		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
				8 Concrete tile	
				9 Other (specify below)	
Blank casing diameter 6 in. to 44 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.		CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____			
Casing height above land surface 60 in., weight _____ lbs./ft. Wall thickness or gauge No. _____		Welded _____			
TYPE OF SCREEN OR PERFORATION MATERIAL:		Threaded _____			
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				7 PVC	
				8 RMP (SR)	
				9 ABS	
				10 Asbestos-cement	
				11 Other (specify) _____	
				12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped		8 Saw cut	
1 Continuous slot		3 Mill slot		9 Drilled holes	
2 Louvered shutter		4 Key punched		10 Other (specify) _____	
				11 None (open hole)	
SCREEN-PERFORATED INTERVALS:		From 24 ft. to 44 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.			
		From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS:		From 20 ft. to 44 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.			
		From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.			
6 GROUT MATERIAL:					
1 Neat cement		2 Cement grout		3 Bentonite	
4 Other _____					
Grout Intervals: From 4 ft. to 20 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
What is the nearest source of possible contamination: NA					
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	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below)	
Direction from well? _____		How many feet? _____			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	16	GRAVEL - CLAY SILT			
16	17	SILT GREY - NO CLAY			
17	19	LIME			
19	23	SHALE DK GREY			
23	23.5	LIME			
23.5	25	SHAL LT GREY			
25	29	LIME			
29	31	SHALE LT GREY			
31	32.5	LIME			
32.5	33.5	SHALE LT GREY			
33.5	38	LIME			
38	40	SHALE			
40	43	LIME			
43	44	SHALE			
44	47	LIME			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 03-15-89 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 479 This Water Well Record was completed on (mo/day/yr) 03-15-89 under the business name of EBBERTS DRILLING by (signature) <i>Morgan Elbert</i>					
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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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