

1 LOCATION OF WATER WELL: County: <u>Morris</u>		Fraction <u>SE 1/4 NE 1/4 SW 1/4</u>	Section Number <u>33</u>	Township Number T <u>17</u> S	Range Number R <u>9</u> EW
Distance and direction from nearest town or city street address of well if located within city? <u>9 South 5 1/4 East of Council Grove</u>					
2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code		<u>Don Pratt</u> <u>5144 Cody</u> <u>Shawnee, Kansas 66203</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		Board of Agriculture, Division of Water Resources Application Number:			
		4 DEPTH OF COMPLETED WELL: <u>62</u> ft. ELEVATION: Depth(s) Groundwater Encountered 1. <u>26</u> ft. 2. <u>26</u> ft. 3. <u>26</u> ft. WELL'S STATIC WATER LEVEL <u>7</u> ft. below land surface measured on mo/day/yr <u>Aug 20 87</u> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield <u>5</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter <u>8</u> in. to <u>23</u> ft., and _____ in. to _____ ft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 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 <u>No</u> ; If yes, mo/day/yr sample was submitted Water Well Disinfected? <u>Yes</u> No			
5 TYPE OF BLANK CASING USED:		5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <u>X</u> Clamped _____ 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____ ② PVC 4 ABS 7 Fiberglass _____ Threaded _____ Blank casing diameter <u>5</u> in. to <u>25</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface <u>15</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>SDR-26</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:		① PVC 10 Asbestos-cement 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____ 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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>25</u> ft. to <u>62</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS:		From <u>NONE</u> 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 <u>3</u> ft. to <u>23</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 1 Septic tank 4 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 <u>Holding TAN</u> Direction from well? <u>South</u> How many feet? <u>90</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Topsoil			
2	8	Clay Redish Brn			
8	12	Clay Sandy			
12	13	Aluvium			
13	17	LIME Cottonwood			
17	25	Shale Gray			
25	27	LIME Frac			
27	29	Shale Dark Gray			
29	34	LIME Gray			
34	38	Shale Gray			
38	50	LIME TAN			
50	58	Shale Green			
58	62	Shale Dark Black?			
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) <u>Aug 20 87</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>Aug 30 87</u> under the business name of <u>ZINN Water Well Drlg.</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.					

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