

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>LYON</u>	<u>NW 1/4 SE 1/4 NE 1/4</u>	<u>15</u>	<u>T 18 S</u>	<u>R 11</u> <u>EW</u>

Distance and direction from nearest town or city street address of well if located within city?

4 3/4 Mile North of Emporia on Highway 99

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>50</u> ft. ELEVATION: <u>50</u> ft.
	Depth(s) Groundwater Encountered 1. <u>27</u> ft. 2. <u>23</u> ft. 3. <u>29</u> ft.
	WELL'S STATIC WATER LEVEL <u>23</u> ft. below land surface measured on mo/day/yr <u>May 13 95</u>
	Pump test data: Well water was <u>5</u> ft. after <u>5</u> hours pumping <u>5</u> gpm
	Est. Yield <u>5</u> gpm: Well water was <u>5</u> ft. after <u>5</u> hours pumping <u>5</u> gpm
	Bore Hole Diameter <u>8 5/8</u> in. to <u>29</u> ft., and <u>6 1/2</u> in. to <u>50</u> ft.
WELL WATER TO BE USED AS:	
<input checked="" type="radio"/> Domestic <input type="radio"/> Feedlot <input type="radio"/> Oil field water supply <input type="radio"/> Dewatering <input type="radio"/> Injection well <input type="radio"/> Irrigation <input type="radio"/> Industrial <input type="radio"/> Lawn and garden only <input type="radio"/> Monitoring well <input type="radio"/> Other (Specify below)	
Was a chemical/bacteriological sample submitted to Department? Yes <u>X</u> No <u>X</u> ; If yes, mo/day/yr sample was submitted	
Water Well Disinfected? <input checked="" type="radio"/> Yes <u>Yes</u> No <u>No</u>	

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped <u>X</u>
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
<input checked="" type="radio"/> 2 PVC	4 ABS	7 Fiberglass	Welded <u>Welded</u>
Blank casing diameter <u>5</u> in. to <u>24</u> ft., Dia <u>5</u> in. to <u>24</u> ft., Dia <u>5</u> in. to <u>24</u> ft., Dia <u>5</u> in. to <u>24</u> ft.			Threaded <u>Threaded</u>
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:			
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	8 Saw cut
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>50</u> ft.	From <u>25</u> ft. to <u>50</u> ft.
GRAVEL PACK INTERVALS:		From <u>24</u> ft. to <u>50</u> ft.	From <u>24</u> ft. to <u>50</u> ft.

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other
Grout Intervals: From <u>3</u> ft. to <u>24</u> ft., From <u>3</u> ft. to <u>24</u> ft., From <u>3</u> ft. to <u>24</u> ft., From <u>3</u> ft. to <u>24</u> ft.				
What is the nearest source of possible contamination:				
1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandoned water well
2 Sewer lines	5 Cess pool	<input checked="" type="radio"/> 8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
Direction from well? <u>North West</u>		How many feet? <u>150'</u>		

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	Topsoil BIK			
5	12	Shale TAN			
12	24	Clay TAN			
24	27	SANDY Clay TAN			
27	30	LIME TAN			
30	40	Shale Grm			
40	46	Shale LIME Gray			
46	50	Shale BIK			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="radio"/> constructed, <input type="radio"/> reconstructed, or <input type="radio"/> plugged under my jurisdiction and was completed on (mo/day/year) <u>May 13 95</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>May 14 95</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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.