| WATE | R WELL | RECOR | ED | Form W | Division of Water Resources; App. No. | | | | | |
|---|--------------|---------------|-------------------------|---------------------|---------------------------------------|--|------------|----------------------------|--------------------------|--|
| | | F WATER | | Fraction | | Section N | umber | Township Number | Range Number | |
| Coun | ty: | Kil | Y | 5W1/4 5 B | 1/4 N W/4 | | | T G(S) | R 6 (F)W | |
| Dista | nce and dir | ection from | nearest town or cit | y street address | of well if | Global Positioning Systems (decimal degrees, min. of 4 digits) | | | | |
| Distance and direction from nearest town or city street address of well if located within city? From Maphin to 60 8 While South | | | | | | | Latitude: | | | |
| 2 WATER WELL OWNER: Charles Zollie | | | | | | Longitude: | | | | |
| RR# | , St. Addre | ss, Box # | ··· Charry | 100 76 Th | Datum: | | | | | |
| City State 7ID Code | | | | | | Data Collection Method: | | | | |
| 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL | | | | | | | | | | |
| LOCATION | | | | | | | | | | |
| WITH AN "X" IN Depth(s) Groundwater Encountered (1). 151 | | | | | | | | ft. | | |
| SECTION BOX: WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr | | | | | | | | /yr | | |
| N Pump test data: Well water wasft. after hours pumping | | | | | | | | | gpm | |
| Est. Yield. 50gpm: Well water was | | | | | | | | | gpm | |
| WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well Domesting 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) | | | | | | | | | | |
| W E Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well | | | | | | | | | | |
| | | | | | | | | | | |
| SW SE Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs | | | | | | | | | | |
| Sample was submitted | | | | | | | | | | |
| s | | | | | | | | | | |
| 5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS Glued Clamped | | | | | | | | | | |
| 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded | | | | | | | | | | |
| Threaded | | | | | | | | | | |
| Blank casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface in., Weight ft., Wall thickness or guage No. | | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | | |
| 1 Steel 3 Stainless Steel 5 Fiberglass PVO 9 ABS 11 Other (Specify) | | | | | | | | | | |
| 2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) | | | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | | |
| 1 Continuous slot 3 Mill slot 5 Guazed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) | | | | | | | | | | |
| 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) | | | | | | | | | | |
| From ft. to ft. From ft. to ft. | | | | | | | | | | |
| From ft. to ft., From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 25 ft. to 160 ft., From ft. to ft. | | | | | | | | | | |
| From ft. to ft., From ft. to ft. | | | | | | | | | | |
| (CDOUT MATERIAL 1N | | | | | | | | | | |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other Grout Intervals: From | | | | | | | | | | |
| | | | | | | | | | | |
| | Septic tank | | 4 Lateral lines | | 10 Lives | tock pens | 13 In: | secticide Storage | 16 Other (specify | |
| | Sewer line | | | 8 Sewage lagoo | | • | | bandoned water well | below) | |
| | | sewer lines | | 9 Feedyard | | izer Storage | | il well/gas well | | |
| | | 1? | T ITTLOT OCIO | | | | | DI LICCOLO DE | | |
| FROM | TO | | LITHOLOGIC | LOG | FROM | I TO | | PLUGGING INT | ERVALS | |
| 0 | 00 | 10% " | 161 | | 15/ | 14/ | 4 | uslowe / | | |
| 192 | 105 | Bron | Coly | | 1,4 | 1 12 | SIM | In Shall | | |
| 35 | 35 | BAU | Chel | - | 13 | 160 | CNY | OILY S MALL | | |
| 33_ | 27 | J'ANG | Tour | | | | - | | | |
| 50 | 1/2 | 1/1//0 | - Chall | | | | | | - | |
| 1/3 | 26 | 1 Zinis | Tent | | | | | | | |
| 71 | 4/ | Brown | Shell | | | | | | | |
| 43/ | 715 | Lines | ONC | | | | | | | |
| 115 139 Brown Sholl | | | | | | | | | | |
| 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). | | | | | | | | | | |
| | | | | | | | | | wledge and belief. | |
| | | | | | | | | d on (mo/day/year) | 15/11/04 | |
| | e business | | or hall point pen DIFA | NOTA VI | Y and PRINT old | oy (signatu: arly Please fi | | s, underline deirele the c | correct arguers Cond ton | |
| three copi | es to Kansas | Department of | f Health and Environmen | nt, Bureau of Water | , Geology Sectio | n, 1000 SW Ja | ckson St., | Suite 420, Topeka, Kansas | 66612-1367. Telephone | |
| 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$3.00 for each constructed well. Visit us at | | | | | | | | | | |
| http://www.kdhe.state.ks.us/geo/waterwells. | | | | | | | | | | |