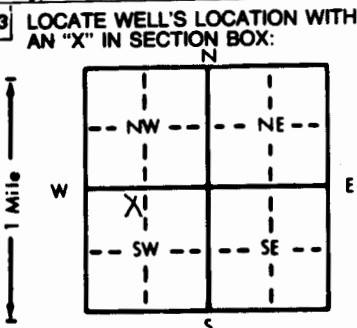


1 LOCATION OF WATER WELL: Fraction NE 1/4 NW 1/4 SW 1/4 Section Number 31 Township Number T 11 S Range Number R 32 E/W
 County: LOGAN

Distance and direction from nearest town or city street address of well if located within city?
LEGAL CONFIRMED BY GMD 4

2 WATER WELL OWNER: WILLIAM ZERR Board of Agriculture, Division of Water Resources
 RR#, St. Address, Box #: RT 2 BOX 81 Application Number:
 City, State, ZIP Code: OAKLEY, KS 67748



4 DEPTH OF COMPLETED WELL: NA ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. NA ft. 2. NA ft. 3. NA ft.
 WELL'S STATIC WATER LEVEL: NA ft. below land surface measured on mo/day/yr
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter _____ in. to _____ 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 Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes X No

5 TYPE OF BLANK 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 _____
 2 PVC 4 ABS 7 Fiberglass _____ Threaded _____
 Blank casing diameter 5 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 6 below in., weight _____ lbs./ft. Wall thickness or gauge No. _____
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 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 _____ ft. to _____ ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: 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 9 ft. to 6 ft., From _____ ft. to _____ ft., From _____ ft. to _____ 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 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage ⑥ Other (specify below)
 _____ 13 Insecticide storage NONE

Direction from well? _____ How many feet? _____

| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|----|----------------|------|----|-----------------------|
| | | | TD | 20 | REMOVED 6ft OF CASING |
| | | | 20 | 9 | GRAVEL |
| | | | 9 | 6 | CLAY |
| | | | 6 | 0 | CEMENT |
| | | | | | SURFACE CLAY |

RECEIVED

AUG 14 1989

DIVISION OF ENVIRONMENT

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) 7-4-89 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) 8-4-89 under the business name of _____ by (signature) William Ogura

OFFICE USE ONLY
T
R
EW
SEC
1/4
1/4
1/4