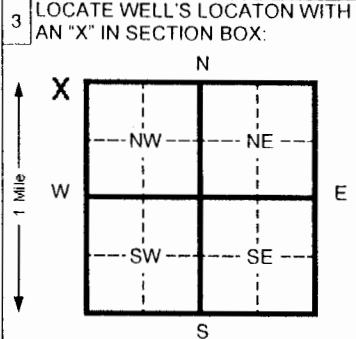


1 LOCATION OF WATER WELL: Fraction NE 1/4 NW 1/4 NE 1/4 Section Number 36 Township Number T 11 S Range Number R 33 E  
 County: Logan  
 Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: William Zerr  
 RR#, St. Address, Box # : 2517 Co Rd 400 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : Oakley, Ks 67748 Application Number: 15665



4 DEPTH OF COMPLETED WELL 143 ft. ELEVATION:  
 Depth(s) Groundwater Encountered 1 \_\_\_\_\_ ft. 2 \_\_\_\_\_ ft. 3 \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL 116 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 28 in. to 150 ft. and \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well  
 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  
 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well  
 Was a chemical/bacteriological sample submitted to Department? Yes  No \_\_\_\_\_ If yes, mo/day/yr sample was submitted \_\_\_\_\_  
 Water Well Disinfected? Yes  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 16 in. to 103 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface 24 in., weight 16.13 lbs./ft. Wall thickness or gauge No. .500  
 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 103 ft. to 143 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 GRAVEL PACK INTERVALS: From 20 ft. to 143 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 0 ft. to 20 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 13 Insecticide storage 16 Other (specify below)  
 Direction from well? \_\_\_\_\_ How many feet? \_\_\_\_\_

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2		Surface	102	110	Fine sand
2	12		Loess	110	125	Fine to some med sand
12	21		Sandstone & clay	125	139	Fine to med sd & some gravel
21	30		Clay & caliche	139	150	Yellow ochre & grey shale
30	36		Sandstone w/clay strks			
36	45		Fine sand w/clay strks			
45	52		Sandstone w/caliche			
52	61		Fine sand w/clay strk			
61	75		Sandstone w/caliche w/clay			
75	90		Fine to some med sd w/caliche			
			Lens			
90	97		Fine to some med sd w/clay			
			Lens			
97	102		Clay & caliche w/a few sd strks			

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/yr) 02-25-09 and this record is true to the best of my knowledge and belief. Kansas  
 Water Well Contractor's License No. 783 This Water Well Record was completed on (mo/day/yr) 2-27-09  
 under the business name of Woofter Pump & Well Inc. by (signature) [Signature]  
 INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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