

1 LOCATION OF WATER WELL: County: Barton																	
Fraction SE NW SW			Section Number 33	Township Number T 20 S	Range Number R 11W E/W												
Distance and direction from nearest town or city street address of well if located within city? 2 E, 5 Sof Ellinwood, Kansas																	
2 WATER WELL OWNER: Milton Meyer			Sterling Drilling Co.	Meyer 1-33													
RR#, St. Address, Box # : Ellinwood, Ks.			Box 129	Board of Agriculture, Division of Water Resources													
City, State, ZIP Code : 67526			Sterling, Ks. 67579	Application Number: 920-363													
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 96 ft. ELEVATION:															
N ↑ ↓ N S ← → S NW NE SE SW X		Depth(s) Groundwater Encountered 1.ft. 2.ft. 3.ft. WELL'S STATIC WATER LEVEL 20 ft. below land surface measured on mo/day/yr 4/10/93 Pump test data: Well water wasft. afterhours pumpinggpm Est. Yieldgpm: Well water wasft. afterhours pumpinggpm Bore Hole Diameterin. toft., andin. toft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic WAS 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.....; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes No															
5 TYPE OF BLANK CASING USED:																	
1 Steel 3 RMP (SR) 2 PVC 4 ABS Blank casing diameter . . . 5 . . .in. to . . .ft., Dia . . .in. to . . .ft., Dia . . .in. to . . .ft. Casing height above land surface . . 3 ft. below . . .in., weight . . .lbs./ft. Wall thickness or gauge No. . . TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) NA 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) NA SCREEN-PERFORATED INTERVALS: From . . .NA . . .ft. to . . .NA . . .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. GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Intervals: From . . . 20 . . .ft. to . . . 3 . . .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 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 Direction from well? How many feet? FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 96 20 Sand and gravel 20 3 Bentonite 3 0 Top soil <tr><td colspan="6">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) 4/10/93 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186 This Water Well Record was completed on (mo/day/yr) 4/21/93 under the business name of Kelly's Water Well Service, Inc. by (signature) [Signature]</td></tr><tr><td colspan="6"> 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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records. </td></tr>						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) 4/10/93 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186 This Water Well Record was completed on (mo/day/yr) 4/21/93 under the business name of Kelly's Water Well Service, Inc. by (signature) [Signature]						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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					
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