

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>Rice</u>	<u>SE</u> 1/4 <u>se</u> 1/4 SW 1/4	<u>33</u>	T <u>20</u> S	R <u>7</u> W E/W

Distance and direction from nearest town or city? 1 1/2 s 1 1/2 e Saxman, Ks.  
 Street address of well if located within city?

2 WATER WELL OWNER: Gary Zwick  
 RR#, St. Address, Box #: R2  
 City, State, ZIP Code: Sterling, Ks. 67579  
 Board of Agriculture, Division of Water Resources  
 Application Number: none

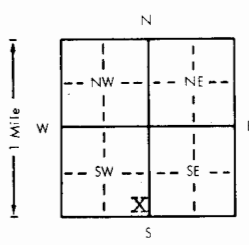
3 DEPTH OF COMPLETED WELL: 57 ft. Bore Hole Diameter: 8 in. to 57 ft., and ..... in. to ..... ft.  
 Well Water to be used as:  
 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well  
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  
 7 Lawn and garden only 10 Observation well  
 Well's static water level: 8 ft. below land surface measured on 9 month 30 day 80 year  
 Pump Test Data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield 75 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

4 TYPE OF BLANK CASING USED:  
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued ..... Clamped .....  
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded .....  
 7 Fiberglass ..... Threaded .....  
 Blank casing dia: 5 in. to 37 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface: 12 in., weight 2.8 lbs./ft. Wall thickness or gauge No. sch 40

TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement  
 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) .....  
 9 ABS 12 None used (open hole)  
 Screen or Perforation Openings Are:  
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)  
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes  
 7 Torch cut 10 Other (specify) .....  
 Screen-Perforation Dia: 5 in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Screen-Perforated Intervals: From 37 ft. to 57 ft., From ..... ft. to ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft. to ..... ft.  
 Gravel Pack Intervals: From 10 ft. to 57 ft., From ..... ft. to ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft. to ..... ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....  
 Grouted Intervals: From 0 ft. to 10 ft., From ..... ft. to ..... ft. to ..... ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well  
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well  
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)  
 13 Watertight sewer lines  
 Direction from well: 8 W. How many feet: 80 ? Water Well Disinfected? Yes No  
 Was a chemical/bacteriological sample submitted to Department? Yes No If yes, date sample  
 was submitted ..... month ..... day ..... year: Pump Installed? Yes No  
 If Yes: Pump Manufacturer's name ..... Model No. .... HP ..... Volts  
 Depth of Pump Intake ..... ft. Pumps Capacity rated at ..... gal./min.  
 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was  
 completed on 9 month 30 day 80 year  
 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 10 month 20 day 80 year under the business  
 name of Kellys Waterwell Serv. by (signature) Kelly Price

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	
		<u>0</u>	<u>15</u>	<u>Top Soil-Clay</u>			
		<u>15</u>	<u>57</u>	<u>Sand-Gravel</u>			

ELEVATION: unknown

Depth(s) Groundwater Encountered 1. 15 ft. 2. .... ft. 3. .... ft. 4. .... ft. (Use a second sheet if needed)

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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.