

<b>[1] LOCATION OF WATER WELL:</b>		Fraction	NE ¼ NE ¼ NE ¼	<b>Section Number</b>	KSA 82a-1212 28	Township Number	T 22 S	Range Number	R 15W E/W
Distance and direction from nearest town or city street address of well if located within city? <b>6E, EN of Zook, Ks.</b>									
<b>[2] WATER WELL OWNER:</b> Dean Zook									
RR#, St. Address, Box # : RR 2									
City, State, ZIP Code : Larned, Ks. 67550									
Board of Agriculture, Division of Water Resources Application Number:									
<b>[3] LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>		<b>[4] DEPTH OF COMPLETED WELL:</b> 42 ft. <b>ELEVATION:</b> unknown							
<p>A diagram showing a section box divided into four quadrants labeled NW, NE, SW, SE. An 'X' is marked in the NE quadrant.</p>		Depth(s) Groundwater Encountered 1. ....ft. 2. ....ft. 3. ....ft.							
		WELL'S STATIC WATER LEVEL ... 41 ....ft. below land surface measured on mo/day/yr ... 5-16-98							
		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: 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 Monitoring well							
Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted .....									
<b>[5] TYPE OF BLANK CASING USED:</b>									
1 Steel		3 RMP (SR)		5 Wrought iron		8 Concrete tile		CASING JOINTS: Glued .....	
2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)		Clamped .....	
				7 Fiberglass				Welded .....	
Blank casing diameter .... 0 ....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. ....									
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>									
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)	
<b>SCREEN OR PERFORATION OPENINGS ARE:</b>									
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) N/A			
<b>SCREEN-PERFORATED INTERVALS:</b>									
From .... N/A ....ft. to ....ft., From ....ft. to ....ft.									
GRAVEL PACK INTERVALS:		From .... N/A ....ft. to ....ft., From ....ft. to ....ft.							
FROM		TO		LITHOLOGIC LOG					
				FROM 42 TO 3 PLUGGING INTERVALS					
				bentonite					
				top soil					
<b>[6] GROUT MATERIAL:</b>									
1 Neat cement		2 Cement grout		3 Bentonite		4 Other .....			
Grout Intervals: From... 42 ....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	
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		16 Other (specify below)	
Direction from well?									
How many feet?									
<b>[7] CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b>									
This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) ... 5-16-98 ... 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) ... 5-22-98									
under the business name of Kelly's Water Well Service, Inc. by (signature) Kathryn L Good									
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.									