

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Pawnee	SW ¼ NE ¼ SE ¼	9	T 23 S	R 16W E/W	
Distance and direction from nearest town or city street address of well if located within city?					
1/2 N of Zook, Kansas					
2 WATER WELL OWNER:	Joyce Zook	Sterling Drilling Co.	Joyce Zook #2		
RR#, St. Address, Box # :	609 W 17th	Box 1006	Board of Agriculture, Division of Water Resources		
City, State, ZIP Code :	Larned, Kansas 67550	Pratt, Kansas 67124	Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL.....80..... ft. ELEVATION:				
	Depth(s) Groundwater Encountered 1.....ft. 2.....ft. 3.....ft.				
	WELL'S STATIC WATER LEVEL60.... ft. below land surface measured on mo/day/yr11/5/96.....				
	Pump test data: Well water wasft. after hours pumping gpm				
	Est. Yield gpm: Well water wasft. after hours pumping gpm				
	Bore Hole Diameter.....in. toft., and.....in. toft.				
WELL WATER XXXX 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 sub-					
mitted					
Water Well Disinfected? Yes No					
5 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 diameter ...5.....in. to ...60.....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	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-PERFORATED INTERVALS: From.....60.....ft. to.....80.....ft., From.....ft. to.....ft., From.....ft. to.....ft.					
GRAVEL PACK INTERVALS: From.....20.....ft. to.....80.....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	12 Fertilizer storage	16 Other (specify below)
Direction from well?				How many feet?	
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
			80	60	Sand and gravel
			60	3	Bentonite
			3	0	Top soil
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)11/5/96..... 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)11/11/96..... under the business name of Kelly's Water Well Service, Inc. by signature <i>[Signature]</i>					
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.					