

1 LOCATION OF WATER WELL:	Fraction <u>NE 1/4 NW 1/4 NW 1/4</u>	Section Number <u>22</u>	Township Number T <u>24</u> S	Range Number R <u>15</u> EW <u>0</u>
County: <u>Stafford</u>				
Distance and direction from nearest town or city street address of well if located within city?				

2 WATER WELL OWNER: Dan Kinzie
RR#, St. Address, Box # : Box 464
City, State, ZIP Code : Macksville, KS 67557

Board of Agriculture, Division of Water Resources
Application Number: MW20

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

1 Mile

4 DEPTH OF COMPLETED WELL. 66 ft. ELEVATION: _____

Depth(s) Groundwater Encountered 1. 17.82 ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 17.82 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 8 in. to 66 ft., and _____ in. to _____ ft.

WELL WATER TO BE USED AS:

5 Public water supply	8 Air conditioning	11 Injection well
1 Domestic	3 Feedlot	6 Oil field water supply
2 Irrigation	4 Industrial	7 Lawn and garden only
		9 Dewatering
		10 Monitoring well
		12 Other (Specify below) _____

Was a chemical/bacteriological sample submitted to Department? Yes _____ No X _____; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes _____ No X _____

5 TYPE OF BLANK CASING USED:		3 Wrought iron		8 Concrete tile		CASING JOINTS: Glued Clamped	
1 Steel		6 Asbestos-Cement		9 Other (specify below)		Welded	
<u>2 PVC</u>		7 Fiberglass				Threaded <u>X</u>	
4 RMP (SR)							
Blank casing diameter <u>2</u> in. to <u>56</u> ft., Dia							
Casing height above land surface <u>0</u> in., weight <u>716</u> lbs./ft.						Wall thickness or gauge No. <u>154</u>	
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel		7 <u>PVC</u>		10 Asbestos-cement	
2 Brass		4 Galvanized steel		8 RMP (SR)		11 Other (specify)	
				9 ABS		12 None used (open hole)	
3 Fiberglass							
4 Concrete tile							
SCREEN OR PERFORATION OPENINGS ARE:							
1 Continuous slot		3 Mill slot		5 Gauzed wrapped		8 <u>Saw cut</u>	
2 Louvered shutter		4 Key punched		6 Wire wrapped		11 None (open hole)	
				7 Torch cut		9 Drilled holes	
						10 Other (specify)	
SCREEN-PERFORATED INTERVALS: From <u>56</u> ft. to <u>66</u> ft., From ft. to ft.							
From ft. to ft., From ft. to ft.							
GRAVEL PACK INTERVALS: From <u>19</u> ft. to <u>66</u> 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 17 ft. From 17 ft. to 19 ft. From 19 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? 13 Insecticide storage Contaminated site
How many feet?

[illegible]

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) 7.13.99 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/yr) 11.22.99 under the business name of Woolter Pump & Well Inc. by (signature) James C. Woolter

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.