

<b>1 LOCATION OF WATER WELL:</b>		Fraction	Township Number	Range Number	
County: <u>Reno</u>		<u>NW ¼ SW ¼ NW ¼</u>	<u>3</u>	<u>24 S R 4 EW</u>	
Distance and direction from nearest town or city street address of well if located within city? <u>7 mi No. of Haven 1 West E ¼ So</u>					
<b>2 WATER WELL OWNER:</b> <u>Bill Morgan</u>		Board of Agriculture, Division of Water Resources Application Number: <u>26311</u>			
RR#, St. Address, Box #: <u>6616 Worthington</u>					
City, State, ZIP Code: <u>Burton</u>					
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>		<b>4 DEPTH OF COMPLETED WELL:</b> <u>50'</u> ft. ELEVATION: _____ ft.			
		Depth(s) Groundwater Encountered 1. <u>10'</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>4.5</u> ft. below land surface measured on mo/day/yr <u>12-31-93</u>			
		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 <u>.28</u> in. to _____ 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    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 <u>X</u> ; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No <u>X</u>			
<b>5 TYPE OF BLANK CASING USED:</b>					
1 Steel    3 RMP (SR)    5 Wrought iron    8 Concrete tile    CASING JOINTS: Glued <u>X</u> Clamped _____ 2 PVC    4 ABS    6 Asbestos-Cement    9 Other (specify below)    Welded _____ 7 Fiberglass    Threaded _____					
Blank casing diameter <u>16</u> in. to <u>30'</u> ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.					
Casing height above land surface <u>12</u> in., weight <u>Sec 40</u> 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) _____					
<b>SCREEN-PERFORATED INTERVALS:</b> From <u>30</u> ft. to <u>50</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>50</u> ft., From _____ ft. to _____ ft.					
<b>6 GROUT MATERIAL:</b> 1 Neat cement    2 Cement grout    3 Bentonite    4 Other _____					
Grout Intervals: From <u>0</u> ft. to <u>20</u> 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) _____ 13 Insecticide storage					
Direction from well? _____ How many feet? _____					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>3</u>	<u>TS</u>			
<u>3</u>	<u>10</u>	<u>Clay</u>			
<u>10</u>	<u>50</u>	<u>med Sand &amp; Gravel</u>			
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>12-31-93</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>537</u> This Water Well Record was completed on (mo/day/yr) <u>1-31-93</u> under the business name of <u>Flowers Drilling</u> by (signature) <u>Mike Flowers</u>					
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.					