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|--|--|--|--|------------------|--|-----------------|--|--------------|--|
| 1 LOCATION OF WATER WELL: | | Fraction | | Section Number | | Township Number | | Range Number | |
| County: Meade | | SE ¼ SE ¼ SW ¼ | | 22 | | T 30 S | | R 27 EW | |
| Distance and direction from nearest town or city street address of well if located within city? | | | | | | | | | |
| 2 North and 3½ West of Fowler, Kansas | | | | | | | | | |
| 2 WATER WELL OWNER: | | Amelia Zortman | | | | | | | |
| RR#, St. Address, Box # : | | Board of Agriculture, Division of Water Resources | | | | | | | |
| City, State, ZIP Code : | | Fowler, Kansas 67844 Application Number: --- | | | | | | | |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | | 4 DEPTH OF COMPLETED WELL: 34.5 ft. ELEVATION: Slope | | | | | | | |
| | | Depth(s) Groundwater Encountered 1 Not available ft. 2 ft. 3 ft. | | | | | | | |
| | | WELL'S STATIC WATER LEVEL 110 ft. below land surface measured on mo/day/yr July 27, 1988 | | | | | | | |
| | | Pump test data: Well water was ft. after hours pumping gpm | | | | | | | |
| | | Est. Yield ... 20 ... gpm: Well water was ft. after hours pumping gpm | | | | | | | |
| | | Bore Hole Diameter .10 in. to 34.5 ft., and in. to ft. | | | | | | | |
| WELL WATER TO BE USED AS: | | 5 Public water supply 8 Air conditioning 11 Injection well XXX Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes No XXX; If yes, mo/day/yr sample was submitted | | | | | | | | | |
| Water Well Disinfected? Yes XX No | | | | | | | | | |
| 5 TYPE OF BLANK CASING USED: | | 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued XX Clamped 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded XX PVC 4 ABS 7 Fiberglass Threaded | | | | | | | |
| Blank casing diameter ... 5 in. to 30.5 ft., Dia in. to ft. | | | | | | | | | |
| Casing height above land surface 15 in., weight 2.8 lbs./ft. Wall thickness or gauge No. ... 265 | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | XXX PVC 10 Asbestos-cement 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | 5 Gauzed wrapped XX Saw cut 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From ... 30.5 ft. to 34.5 ft., From ft. to ft. | | | | | | | | | |
| GRAVEL PACK INTERVALS: From ... 20 ft. to 34.5 ft., From ft. to ft. | | | | | | | | | |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite XX Other Baroid Hole Plug | | | | | | | | | |
| Grout Intervals: From ... 0 ft. to 20 ft., From ft. to ft. | | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | | |
| XX 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? | | South | | How many feet? | | 100 | | | |
| FROM | | TO | | LITHOLOGIC LOG | | FROM | | TO | |
| 0, | | 3 | | Topsoil | | | | | |
| 3 | | 29 | | Clay | | | | | |
| 29 | | 37 | | Fine Sand | | | | | |
| 37 | | 210 | | Blue Clay | | | | | |
| 210 | | 321 | | Clay & Fine Sand | | | | | |
| 321 | | 342 | | Small Gravel | | | | | |
| 342 | | 345 | | Black Shale | | | | | |
| 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) July 27, 1988 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 252 This Water Well Record was completed on (mo/day/yr) August 11, 1988 under the business name of Friesen Windmill & Supply Inc. by (signature) | | | | | | | | | |
| 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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records. | | | | | | | | | |