

1 LOCATION OF WATER WELL:		Fraction		Section Number	Township Number	Range Number
County: Grant		NE ¼ NE ¼ NW ¼		20	T 30 S	R 35 EW
Distance and direction from nearest town or city street address of well if located within city? 8 East, 9 South, 2.5 East of Ulysses						
2 WATER WELL OWNER: Brian Zimmerman						
RR#, St. Address, Box # : 10679 East rd. 22				Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Ryus, KS				Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 500 ft. ELEVATION:				
		Depth(s) Groundwater Encountered 1 290 ft. 2 _____ ft. 3 _____ ft.				
		WELL'S STATIC WATER LEVEL 290 ft. below land surface measured on mo/day/yr 10/20/05				
		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 10 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 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)						
2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well						
Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was submitted _____						
Water Well Disinfected? Yes X 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 Eagle-Loc Threaded _____						
Blank casing diameter 5 in. to 500 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.						
Casing height above land surface 12 in., weight _____ lbs./ft. Wall thickness or gauge No. SDR 21						
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 9 ABS 11 Other (specify) _____						
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 312 ft. to 332 ft. From 392 ft. to 412 ft.						
From 432 ft. to 452 ft. From 472 ft. to 492 ft.						
GRAVEL PACK INTERVALS: From 5 ft. to 25 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 5 ft. to 25 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 None observed						
Direction from well? _____ How many feet? _____						
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	12		Topsoil & clay			
12	20		Caliche			
20	64		Clay & a little caliche			
64	140		Sand, med & a little clay			
140	240		Brown, sandy clay			
240	267		Clay & a little caliche			
267	380		Sand & a little clay			
380	407		Caliche & a little clay			
407	420		Red clay			
420	460		Red sandstone			
460	480		White sandstone & a little clay			
480	540		White & red sandstone; little cl			
540	560		Red bed			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was _____ constructed						
completed on (mo/day/yr) 10/20/05 and this record is true to the best of my knowledge and belief. Kansas						
Water Well Contractor's License No. 473 This Water Well Record was completed on (mo/day/yr) 11/10/05						
under the business name of Tyler Water Well Service, Inc. by (signature) <i>Paul J. [Signature]</i>						
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send 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.						

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