

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Morton		SW 1/4 SW 1/4 SW 1/4		35		T 34 S		R 40 E/W	
Distance and direction from nearest town or city street address of well if located within city? 5 MILES SOUTH & 1 MILE WEST OF ROLLA, KANSAS.									
2 WATER WELL OWNER: Wesley Bressler									
RR#, St. Address, Box #: Rt. 1 Box 64						Board of Agriculture, Division of Water Resources			
City, State, ZIP Code: Elkhart, Kansas 67950						Application Number: 41,853			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 458 ft. ELEVATION:							
1 Mile N W E S NW NE SW SE X		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL . . 1.96 . . . ft. below land surface measured on mo/day/yr . . 2-26-98 . . . 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 . . 26 . . . in. to . . 458 . . . 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) X Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, mo/day/yr sample was sub- mitted Water Well Disinfected? Yes No							
5 TYPE OF BLANK CASING USED:									
X 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 X 7 Fiberglass Threaded Blank casing diameter . . . 16 . . . in. to . . 458 . . . ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft. Casing height above land surface . . . 12 . . . in., weight . . 42.5 . . . lbs./ft. Wall thickness or gauge No. . . . 250 . . . TYPE OF SCREEN OR PERFORATION MATERIAL: X Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 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 X 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 0 . . . ft. to . . . 0 . . . ft., From . . 201 . . . ft. to . . 458 . . . ft. From ft. to . . . ft., From ft. to . . . ft. GRAVEL PACK INTERVALS: From 20 . . . ft. to . . 458 . . . ft., From ft. to . . . ft. From ft. to . . . ft., From ft. to . . . ft.									
6 GROUT MATERIAL: X 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) 13 Insecticide storage Cropland-nothing Direction from well? How many feet? immediate vicinity									
Direction from well?									
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
0 217 Sticky clay, clay & sand mix									
217 247 Mostly clay w/some sand streaks									
247 277 Mostly clay									
277 308 Mostly clay, clay & sand mix									
308 337 Clay & med. sand									
337 368 Mostly clay w/some sand									
368 399 Mostly clay w/some sand									
399 430 Med. to coarse sand w/some clay streaks									
430 461 Coarse sand & pink clay , red bed									
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (X) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) . . 2-23-98 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . . . 225 This Water Well Record was completed on (mo/day/yr) . . . 4-15-98 under the business name of KTM Drilling, Inc. by (signature) [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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									