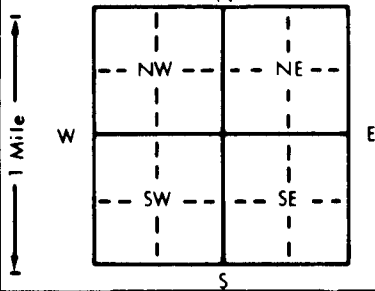


1 LOCATION OF WATER WELL: County: **Norton** Fraction: **SE 1/4 SE 1/4 SW 1/4** Section Number: **33** Township Number: **T 3 S** Range Number: **R 24 E 10**

Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: **Scott Ellis**  
 RR#, St. Address, Box # : **311 N. West Ave.** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : **Norton, Ks. 67654** Application Number:

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



4 DEPTH OF COMPLETED WELL: **155** ft. ELEVATION: .....  
 Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL: **73** 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 **155** 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. **X**.....; If yes, mo/day/yr sample was submitted  
 Water Well Disinfected? Yes **X** No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued **X** Clamped .....  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....  
 2 PVC 4 ABS 7 Fiberglass Threaded .....  
 Blank casing diameter: **4.5** in. to **135** ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface: **18** in., weight **2.38** lbs./ft. Wall thickness or gauge No. **248**  
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 **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 8 **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 **135** ft. to **155** ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From **20** ft. to **155** 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 **20** ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well  
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage **NONE**

Direction from well? FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Surface	109	120	Clay, Caliche & Sandstone St.
3	15	Loess	120	140	Clay, Caliche & Sand Lenses
15	17	Caliche	140	150	Clay & Sand Strks.
17	19	Fine Sand	150	157	Ochre
19	30	Clay, Caliche & Sand Strks.			
30	35	Fine Sand			
35	40	Clay & Caliche			
40	46	Fine Sand/Clay Lenses			
46	55	Sandstone/Clay & Caliche Lysr			
55	65	Clay, Sandy Clay, Sandstone St.			
65	78	Clay			
78	80	Fine Sand			
80	90	Clay & Sand Strks.			
90	102	Med. Sand			
102	109	Clay, Caliche, & Sand Strks.			

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) **9-23-96** 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) **10-6-96** under the business name of **Woofter Pump & Well, 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.