

1 LOCATION OF WATER WELL:		Section Number	Township Number	Range Number
County: Pottawatomie	NE ¼ NW ¼ SW ¼	5	T 10 S	R 12
Distance and direction from nearest town or city street address of well if located within city?				
2 WATER WELL OWNER: William R Fields				
RR#, St. Address, Box # : 26800 Highway 24		Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : St. Marys, Ks 66536		Application Number: 45,829		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 51 ft. ELEVATION:		
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL na 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 28 in. to 51 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 X Clamped 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded 7 Fiberglass Threaded Blank casing diameter 16 in. to 31 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface 24 in., weight 16.15 lbs./ft. Wall thickness or gauge No. .500 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 31 ft. to 51 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 14 ft. to 51 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 14 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? _____ How many feet? _____				
FROM	TO	CODE	LITHOLOGIC LOG	FROM TO PLUGGING INTERVALS
0	3		Surface	
3	14		Clay	
14	31		Sandy clay w/some sand	
31	35		Fine to med sd w/clay, fairly Loose	
35	41		Med sand & gravel w/clay Lenses fairly loose	
41	49		Med sand & gravel w/rocks, Loose	
49	51		Black shale	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was _____				
completed on (mo/day/yr) 4-14-05 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) 5-27-05				
under the business name of Woofter Pump & Well Inc. by (signature) _____				
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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