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|--|---|-----------------------------|---------------------------------|---------------------------------|
| 1 LOCATION OF WATER WELL: County: Washington | Fraction NW 1/4 SW 1/4 NW 1/4 | Section Number 13 | Township Number T 2 S | Range Number R 3 (NW) |
|--|---|-----------------------------|---------------------------------|---------------------------------|

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

3 1/2 North of Washington

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| 2 WATER WELL OWNER: Gail E. Jones RR#, St. Address, Box # : P.O. BOX 4916 City, State, ZIP Code : Woodland Park, CO. 80866 | Board of Agriculture, Division of Water Resources Application Number: |
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| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | 4 DEPTH OF COMPLETED WELL: 82' ft. ELEVATION: |
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Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL **45** ft. below land surface measured on **mo/day/yr 7/6/98**

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield **25** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter **10** in. to **82** 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 **Livestock**

Was a chemical/bacteriological sample submitted to Department? Yes _____ No **8**; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes ***** No

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| 5 TYPE OF BLANK CASING USED: | 5 Wrought iron | 8 Concrete tile | CASING JOINTS: Glued * Clamped _____ |
|------------------------------|----------------|-----------------|---|

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|---------|------------|-------------------|-------------------------|----------------|
| 1 Steel | 3 RMP (SR) | 6 Asbestos-Cement | 9 Other (specify below) | Welded _____ |
| 2 PVC | 4 ABS | 7 Fiberglass | | Threaded _____ |

Blank casing diameter **5** in. to **62** ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.

Casing height above land surface **24** in., weight **200** lbs./ft. Wall thickness or gauge No. **265**

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| TYPE OF SCREEN OR PERFORATION MATERIAL: | | 7 PVC | 10 Asbestos-cement |
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|---------|--------------------|-----------------|------------|--------------------------|
| 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) |

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|-------------------------------------|--|------------------|-----------|---------------------|
| SCREEN OR PERFORATION OPENINGS ARE: | | 5 Gauzed wrapped | 8 Saw cut | 11 None (open hole) |
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|--------------------|---------------|----------------|--------------------------|
| 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 **62** ft. to **82** ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **30** ft. to **82** ft., From _____ ft. to _____ ft.

| | | | | |
|-------------------|---------------|----------------|--------------------|---------------|
| 6 GROUT MATERIAL: | 1 Neat cement | 2 Cement grout | <u>3 Bentonite</u> | 4 Other _____ |
|-------------------|---------------|----------------|--------------------|---------------|

Grout Intervals: From **5** ft. to **30** 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 | |

Direction from well? **NONE PRESENT** How many feet? _____

| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|----|------------------|------|----|--------------------|
| 0 | 1 | Topsoil | | | |
| 1 | 7 | Orange Clay | | | |
| 7 | 30 | Tan Clay | | | |
| 30 | 61 | Blue Clay | | | |
| 61 | 63 | Ironstone | | | |
| 63 | 68 | Sandstone | | | |
| 68 | 72 | Blue Clay | | | |
| 72 | 82 | Sandstone Layers | | | |

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| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 7/6/98 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 518 . This Water Well Record was completed on (mo/day/yr) 1/9/98 under the business name of Blue Valley Drilling by (signature) _____ |
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