

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Thomas</u>		<u>NE 1/4 SW 1/4</u>	<u>14</u>	<u>T 10 S</u>	<u>R 31 E</u> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">NW</span>
Distance and direction from nearest town or city street address of well if located within city? <u>15 miles west 15 miles south and 2 west of Hoxie, Ks.</u>					
2 WATER WELL OWNER: <u>Shea 2-14</u>		<u>Murfin Drilling</u>		Board of Agriculture, Division of Water Resources	
RR#, St. Address, Box #:		<u>Box 661</u>		Application Number: <u>90015</u>	
City, State, ZIP Code:		<u>Colby, Ks. 67701</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>163</u> ft. ELEVATION:			
<div style="text-align: center;"> </div>		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.			
		WELL'S STATIC WATER LEVEL <u>88</u> 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 <u>8</u> in. to <u>163</u> 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..... <u>X</u> ..... If yes, mo/day/yr sample was sub-		Water Well Disinfected? Yes..... No..... <u>X</u> .....			
5 TYPE OF BLANK CASING USED:		5 Wrought iron    8 Concrete tile		CASING JOINTS: Glued .. <u>X</u> .. Clamped ..	
1 Steel    3 RMP (SR)		6 Asbestos-Cement    9 Other (specify below)		Welded ..	
2 PVC    4 ABS		7 Fiberglass		Threaded ..	
Blank casing diameter <u>4.5</u> in. to <u>143</u> ft., Dia		in. to .... ft., Dia		in. to .... ft.	
Casing height above land surface <u>18</u> in., weight <u>2.38</u> lbs./ft. Wall thickness or gauge No. <u>248</u>					
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		10 Other (specify) ..			
2 Louvered shutter    4 Key punched    7 Torch cut					
SCREEN-PERFORATED INTERVALS: From <u>143</u> ft. to <u>163</u> ft., From .... ft. to .... ft.					
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>163</u> ft., From .... ft. to .... ft.					
6 GROUT MATERIAL: 1 Neat cement    2 Cement grout    3 Bentonite    4 Other					
Grout Intervals: From <u>0</u> ft. to <u>20</u> ft., From <u>163</u> 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		12 Fertilizer storage    16 Other (specify below)			
2 Sewer lines    5 Cess pool    8 Sewage lagoon    13 Insecticide storage					
3 Watertight sewer lines    6 Seepage pit    9 Feedyard		How many feet? <u>75</u>			
Direction from well? <u>NE</u>					
FROM	TO	LITHOLOGIC LOG		FROM	TO
0	3	Surface		110	113
3	36	Clay		113	118
36	40	Medium sand with clay streaks		118	123
40	49	Med. sand		123	132
49	56	Clay		132	138
56	67	Clay & caliche		138	150
67	69	Med. sand		150	155
69	74	Hard caliche		155	160
74	76	Clay		160	163
76	85	Med. loose sand			
85	87	Hard caliche with sand strk.			
87	94	Med. sand			
94	100	Clay with sand streaks			
100	110	Fine sand			
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) <u>4-12-90</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>394</u> This Water Well Record was completed on (mo/day/yr) <u>4-16-90</u> under the business name of <u>WOOFER PUMP &amp; WELL</u> by (signature) <u>Walter Woofen</u>					
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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

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