

1 LOCATION OF WATER WELL:		Fraction NW 1/4 SW 1/4 NW 1/4		Section Number 25	Township Number T 10 S	Range Number R 31 E/W
County: Thomas						
Distance and direction from nearest town or city street address of well if located within city? <u>5 1/2</u> Miles East and <u>1 1/2</u> Miles North of Oakley, KS						
2 WATER WELL OWNER: Daniel Bixenman						
RR#, St. Address, Box # :				Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Grainfield, KS 67737				Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>157</u> ft. ELEVATION:				
		Depth(s) Groundwater Encountered 1. <u>53</u> ft. 2. <u>98</u> ft. 3. <u>118</u> ft. WELL'S STATIC WATER LEVEL <u>62</u> ft. below land surface measured on mo/day/yr <u>June 17, 1983</u> 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>9</u> in. to <u>165</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 <u>Oil field water supply</u> 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes <u>X</u> No _____				
		5 TYPE OF BLANK CASING USED:				
		1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <u>X</u> Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____ Blank casing diameter <u>5</u> in. to <u>157</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface <u>12</u> in., weight _____ lbs./ft. Wall thickness or gauge No. _____				
		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 <u>137</u> ft. to <u>157</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From <u>10</u> ft. to <u>157</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
6 GROUT MATERIAL: 1 Neat cement 2 <u>Cement grout</u> 3 Bentonite 4 Other _____						
Grout Intervals: From <u>0</u> ft. to <u>10</u> 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? <u>West</u> How many feet? <u>350</u>						
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	
0	3	Surface				
3	27	01 Clay				
27	36	08 Medium Sand				
36	44	01 Clay				
44	86	07 Fine Sand				
86	98	01 Clay				
98	104	05 Medium to Coarse Sand				
104	113	04 Sandy Clay				
113	118	01 Clay				
118	123	17 Medium Sand & Gravel				
123	137	01 Clay				
137	161	05 Medium to Coarse Sand				
161	163	01 Ochre				
163	165	19 Shale				
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) June <u>17</u> , 1983. 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) July <u>27</u> , 1983 under the business name of <u>Woofter Pump &amp; Well</u> by (signature) <u>Walter Woofter</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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.						

OFFICE USE ONLY

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31

END

SEC.

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11/14

5/11/14

11/14

DP