

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Thomas		SW ¼ SW ¼ SW ¼	30	T 10 S	R 32 E
Distance and direction from nearest town or city street address of well if located within city?					
2 WATER WELL OWNER: Kenneth Hemmert					
RR#, St. Address, Box # : 609 Wink			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Oakley, Ks 67748			Application Number: 20050083		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 156 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 8 in. to 160 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 _____	
Blank casing diameter 4.5 in. to 11.6 ft. Dia		7 Fiberglass		Threaded _____	
Casing height above land surface 18 in., weight 2.384 lbs./ft.		7 PVC		10 Asbestos-cement	
TYPE OF SCREEN OR PERFORATION MATERIAL:		8 RMP (SR)		11 Other (specify)	
1 Steel 3 Stainless steel 5 Fiberglass		9 ABS		12 None used (open hole)	
2 Brass 4 Galvanized steel 6 Concrete tile		8 Saw cut		11 None (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:		9 Drilled holes		10 Other (specify)	
1 Continuous slot 3 Mill slot 5 Gauzed wrapped		6 Wire wrapped			
2 Louvered shutter 4 Key punched 7 Torch cut					
SCREEN-PERFORATED INTERVALS: From 116 ft. to 156 ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
GRAVEL PACK INTERVALS: From 20 ft. to 156 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.	
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well		15 Oil well/ Gas well	
1 Septic tank 4 Lateral lines 7 Pit privy		11 Fuel storage 12 Fertilizer storage		16 Other (specify below)	
2 Sewer lines 5 Cess pool 8 Sewage lagoon		13 Insecticide storage		Oil well	
3 Watertight sewer lines 6 Seepage pit 9 Feedyard		How many feet? 200			
Direction from well? nw					
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
0	3		Surface	98	105
3	17		Louess	105	117
17	25		Fine sand clay strks	117	125
25	31		Med sand & gravel	125	128
31	45		Sandy clay w/sand strks	128	137
45	50		Cemented sand w/clay	137	152
50	53		Sandy clay caliche & cemented	152	154
			Sand	154	160
53	62		Sandy clay & caliche		
62	70		Sandy clay w/med sand layers		
70	75		Med sand & gravel w/fine clay		
			Lenses fairly loose		
75	83		Fine to med sand		
83	98		Med sand & gravel, loose		
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/yr) 3-17-05 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) 3-24-05			
under the business name of Woofor Pump & Well Inc.		by (signature) <i>[Signature]</i>			
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

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