

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Thomas		NE 1/4	26	T 10 S	R 32 E
Distance and direction from nearest town or city street address of well if located within city?					
10 miles South & one mile east & 1/2 South of JCT 24 & 83					
2 WATER WELL OWNER:					
RR#, St. Address, Box #		Howard Trust 1-26		Murfin Drilling	
City, State, ZIP Code		Box 661		Board of Agriculture, Division of Water Resources	
		Colby, Ks. Mo. 67701		Application Number: 900169	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 190 ft. ELEVATION:			
<div style="text-align: center;"><p>1 Mile</p></div>		Depth(s) Groundwater Encountered 1. 190 ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL 95 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 190 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 X If yes, mo/day/yr sample was submitted					
Water Well Disinfected? Yes No X					
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 4.5 in. to 170 ft. Dia. in. to ft. Dia. in. to ft.					
Casing height above land surface 18 in. weight 2.38 lbs./ft. Wall thickness or gauge No. 248					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)		7 PVC 10 Asbestos-cement			
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)		6 Wire wrapped 9 Drilled holes			
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)					
SCREEN-PERFORATED INTERVALS: From 170 ft. to 190 ft. From ft. to ft.					
From ft. to ft. From ft. to ft.					
GRAVEL PACK INTERVALS: From 20 ft. to 190 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 20 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		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					
Direction from well? SW		How many feet? 75			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Surface			
3	37	Clay			
37	55	Med. sand			
55	64	Clay			
64	82	Med. to large gravel			
82	103	Clay			
103	115	Med. sand (loose)			
115	138	Clay			
138	179	Fine sand, med. sand streaks			
179	183	Clay & caliche			
183	190	Ochre & 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/year) 4-19-90 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 394 This Water Well Record was completed on (mo/day/yr) 4-23-90 under the business name of woofter pump 7 well by (signature) <i>Walter Woofter</i>					
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.					