

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <b>Trego</b>		<b>NE 1/4 NE 1/4 SE 1/4</b>	<b>26</b>	<b>T 11 S</b>	<b>R 21 EW</b>
Distance and direction from nearest town or city street address of well if located within city?					
2 WATER WELL OWNER: <b>Lois Sherfick</b>					
RR#, St. Address, Box #: <b>34056 I Road</b>				Board of Agriculture, Division of Water Resources	
City, State, ZIP Code: <b>Ogallah, Ks 67656</b>				Application Number:	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <b>80</b> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.			
		WELL'S STATIC WATER LEVEL <b>na</b> 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 <b>8</b> in. to <b>86</b> 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 <b>X</b> If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes <b>X</b> No			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought Iron	
2 PVC		4 ABS		8 Concrete tile	
				6 Asbestos-Cement	
				9 Other (specify below)	
				7 Fiberglass	
				CASING JOINTS: Glued <b>X</b> Clamped	
				Welded	
				Threaded	
Blank casing diameter <b>4.5</b> in. to <b>60</b> ft., Dia		in. to _____ ft., Dia		in. to _____ ft.	
Casing height above land surface <b>4.5</b> in., weight <b>2.38</b> lbs./ft.		Wall thickness or gauge No. <b>.248</b>			
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				7 PVC	
				8 RMP (SR)	
				9 ABS	
				10 Asbestos-cement	
				11 Other (specify)	
				12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		3 Mill slot		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
				7 Torch cut	
				8 Saw cut	
				9 Drilled holes	
				10 Other (specify)	
				11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From <b>60</b> ft. to <b>80</b> ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <b>20</b> ft. to <b>80</b> ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Intervals From <b>0</b> ft. to <b>20</b> 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	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/ Gas well	
				16 Other (specify below)	
				<b>none</b>	
Direction from well? _____ How many feet? _____					
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
<b>0</b>	<b>2</b>		<b>Surface</b>		
<b>2</b>	<b>14</b>		<b>Sandstone w/caliche</b>		
<b>14</b>	<b>20</b>		<b>Fine to some med sd w/ Sandstone &amp; caliche</b>		
<b>20</b>	<b>28</b>		<b>Clay w/caliche strks</b>		
<b>28</b>	<b>36</b>		<b>Fine sand w/clay &amp; caliche strks</b>		
<b>36</b>	<b>40</b>		<b>Caliche w/sand lenses</b>		
<b>40</b>	<b>46</b>		<b>Fine sand w/caliche</b>		
<b>46</b>	<b>55</b>		<b>Fine sand w/clay lenses</b>		
<b>55</b>	<b>60</b>		<b>Clay</b>		
<b>60</b>	<b>65</b>		<b>Fine sand w/clay lenses</b>		
<b>65</b>	<b>74</b>		<b>Fine to some med sand w/clay</b>		
<b>74</b>	<b>86</b>		<b>Lenses</b>		
			<b>Yellow ochre/blackshale</b>		
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) <b>3-7-08</b> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <b>554</b>		This Water Well Record was completed on (mo/day/yr) <b>3-7-08</b>			
under the business name of <b>Woofor Pump &amp; Well Inc.</b>		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 S W 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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