

1 LOCATION OF WATER WELL:		Fraction	Section Number		Township Number	Range Number
County: Trego		SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$	18		T 12 S	R 21 E W
Distance and direction from nearest town or city street address of well if located within city?						
2 WATER WELL OWNER: Windholz Farms						
RR#, St. Address, Box # : HC 1, Box 6A			Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : Ogallah, Ks 67656-9004			Application Number: 47,760			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 57 ft. ELEVATION:				
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL _____ 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 12 in. to 56 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) <input checked="" type="checkbox"/> 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____				
		5 TYPE OF BLANK CASING USED:				
		1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____ <input checked="" type="checkbox"/> 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____ Blank casing diameter 8 in. to 27 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Casing height above land surface 18 in., weight .332 lbs./ft. Wall thickness or gauge No. 5.594				
		TYPE OF SCREEN OR PERFORATION MATERIAL:				
		1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____ 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) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) _____ SCREEN-PERFORATED INTERVALS: From 27 ft. to 57 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 10 ft. to 57 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 10 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 none						
Direction from well? _____ How many feet? _____						
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2		Surface			
2	12		Clay w/a few sand strks			
12	17		fine to med sd w/clay lens			
			(loose)			
17	20		Sandy clay			
20	25		Fine sand			
25	29		Fine to med sd w/clay lens			
29	48		Fine to med sd & some gravel			
			w/clay lens			
48	54		Fine to some med sd w/sand-			
			Stone & caliche, mostly sandst			
54	56		Yellow ochre			
56			Black & brown 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/yr) 6-23-07 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) 7-20-07			
under the business name of Woofert 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 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-298-5545. Send one to WATER WELL OWNER and retain one for your records.						

OFFICE USE ONLY

T

R

SEC