

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Wichita		SW ¼ SW ¼ NE ¼	16	T 16 S	R 38
Distance and direction from nearest town or city street address of well if located within city?					
2 WATER WELL OWNER: V. M. W. Land Trust					
RR#, St. Address, Box # : Rt 1, S. Bell Street			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Leoti, Ks 67861			Application Number: 845 & 19934		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 222 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 28 in. to 222 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"/> 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	
<input checked="" type="checkbox"/> PVC		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
				8 Concrete tile	
				9 Other (specify below)	
				CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____	
				Welded _____	
				Threaded _____	
Blank casing diameter 16 in. to 182 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface 24 in., weight 16.15 lbs./ft. Wall thickness or gauge No. .500					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
<input checked="" type="checkbox"/> PVC		4 Galvanized steel		6 Concrete tile	
				7 Torch cut	
				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 182 ft. to 222 ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 20 ft. to 222 ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: <input checked="" type="checkbox"/> 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	
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)	
				OLD WELL	
Direction from well? NW How many feet? 300					
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
0	2		Surface	152	158
2	17		Loess	158	171
17	36		Clay & caliche	171	175
36	44		Fine & med sand w/clay strks		
44	66		Clay & caliche w/sand strks	175	187
66	74		Fine to some med sd w/clay lens	187	191
74	85		Clay w/a few sand strks	191	198
85	93		Sandstone w/sandy clay	198	208
93	112		Sandy clay w/a few sand strks		
112	117		Sandy clay, caliche, & sd strks	208	217
117	128		Fine to some med sd w/clay &	217	222
			Caliche strks		
128	142		Sandstone		
142	152		Fine to some med sand		
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) 8-3-04 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) 8-6-04 under the business name of Woofter Pump & Well, Inc. by (signature) <i>Jan C. Woofter</i>					
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

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