

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <u>Greeley</u>		<u>NE 1/4 NE 1/4 SE 1/4</u>		<u>22</u>		<u>T 16 S</u>		<u>R 42 E</u>	
Distance and direction from nearest town or city street address of well if located within city? <u>13 N 10 W Tribune</u>									
2 WATER WELL OWNER: <u>Verdell Young</u>									
RR#, St. Address, Box # :					Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : <u>Tribune, KS 67879</u>					Application Number:				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL: <u>240</u> ft. ELEVATION: <u>3680</u>						
			Depth(s) Groundwater Encountered 1. <u>190</u> ft. 2. <u>190</u> ft. 3. <u>190</u> ft.						
			WELL'S STATIC WATER LEVEL <u>190</u> ft. below land surface measured on mo/day/yr <u>5-18-88</u>						
			Pump test data: Well water was <u>235</u> ft. after <u>2</u> hours pumping <u>15</u> gpm						
			Est. Yield <u>15</u> gpm: Well water was <u>235</u> ft. after <u>2</u> hours pumping <u>15</u> gpm						
			Bore Hole Diameter: <u>8</u> in. to <u>240</u> ft., and <u>8</u> in. to <u>240</u> ft.						
			WELL WATER TO BE USED AS:						
			<input checked="" type="checkbox"/> 1 Domestic <input type="checkbox"/> 3 Feedlot <input type="checkbox"/> 6 Oil field water supply <input type="checkbox"/> 9 Dewatering <input type="checkbox"/> 12 Other (Specify below)						
			<input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 4 Industrial <input type="checkbox"/> 7 Lawn and garden only <input type="checkbox"/> 10 Observation well						
			Was a chemical/bacteriological sample submitted to Department? Yes <u>X</u> No <u>X</u> ; If yes, mo/day/yr sample was submitted						
			Water Well Disinfected? Yes <u>X</u> No <u>X</u>						
5 TYPE OF BLANK CASING USED:									
<input checked="" type="checkbox"/> 1 Steel <input type="checkbox"/> 3 RMP (SR) <input type="checkbox"/> 5 Wrought iron <input type="checkbox"/> 8 Concrete tile    CASING JOINTS <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped									
<input type="checkbox"/> 2 PVC <input type="checkbox"/> 4 ABS <input type="checkbox"/> 6 Asbestos-Cement <input type="checkbox"/> 9 Other (specify below) <input type="checkbox"/> Welded									
<input type="checkbox"/> 7 Fiberglass <input type="checkbox"/> Threaded									
Blank casing diameter <u>5</u> in. to <u>200</u> ft., Dia. <u>5</u> in. to <u>200</u> ft., Dia. <u>5</u> in. to <u>200</u> ft.									
Casing height above land surface <u>18</u> in., weight <u>18</u> lbs./ft. Wall thickness or gauge No. <u>18</u>									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
<input type="checkbox"/> 1 Steel <input type="checkbox"/> 3 Stainless steel <input type="checkbox"/> 5 Fiberglass <input checked="" type="checkbox"/> 7 PVC <input type="checkbox"/> 10 Asbestos-cement									
<input type="checkbox"/> 2 Brass <input type="checkbox"/> 4 Galvanized steel <input type="checkbox"/> 6 Concrete tile <input type="checkbox"/> 9 ABS <input type="checkbox"/> 11 Other (specify)									
<input type="checkbox"/> 12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
<input type="checkbox"/> 1 Continuous slot <input type="checkbox"/> 3 Mill slot <input type="checkbox"/> 5 Gauzed wrapped <input checked="" type="checkbox"/> 8 Saw cut <input type="checkbox"/> 11 None (open hole)									
<input type="checkbox"/> 2 Louvered shutter <input type="checkbox"/> 4 Key punched <input type="checkbox"/> 6 Wire wrapped <input type="checkbox"/> 9 Drilled holes									
<input type="checkbox"/> 7 Torch cut <input type="checkbox"/> 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From <u>200</u> ft. to <u>240</u> ft., From <u>200</u> ft. to <u>240</u> ft., From <u>200</u> ft. to <u>240</u> ft.									
GRAVEL PACK INTERVALS: From <u>180</u> ft. to <u>240</u> ft., From <u>180</u> ft. to <u>240</u> ft., From <u>180</u> ft. to <u>240</u> ft.									
6 GROUT MATERIAL:									
<input checked="" type="checkbox"/> 1 Neat cement <input type="checkbox"/> 2 Cement grout <input type="checkbox"/> 3 Bentonite <input type="checkbox"/> 4 Other									
Grout Intervals: From <u>10</u> ft. to <u>30</u> ft., From <u>10</u> ft. to <u>30</u> ft., From <u>10</u> ft. to <u>30</u> ft.									
What is the nearest source of possible contamination:									
<input type="checkbox"/> 1 Septic tank <input type="checkbox"/> 4 Lateral lines <input type="checkbox"/> 7 Pit privy <input checked="" type="checkbox"/> 10 Livestock pens <input type="checkbox"/> 14 Abandoned water well									
<input type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 5 Cess pool <input type="checkbox"/> 8 Sewage lagoon <input type="checkbox"/> 11 Fuel storage <input type="checkbox"/> 15 Oil well/Gas well									
<input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 9 Feedyard <input type="checkbox"/> 12 Fertilizer storage <input type="checkbox"/> 16 Other (specify below)									
<input type="checkbox"/> 13 Insecticide storage									
Direction from well? <u>Pens used intermittently to 1-409</u> How many feet? <u>30</u>									
FROM TO LITHOLOGIC LOG					FROM TO LITHOLOGIC LOG				
0 15 TOP SOIL					180 185 LIME				
15 30 CLAY					185 195 CLAY				
30 37 CLAY					195 210 CEMENTED SAND & LITTLE CLAY				
37 45 LIME & CLAY					210 221 SAND & CLAY STREAKS				
45 54 SAND					221 225 CLAY				
54 60 CLAY					225 235 CLAY				
60 75 LIME					235 240 SHALE				
75 90 CLAY & LIME									
90 105 CLAY & LIME									
105 120 CLAY & LIME									
120 129 CLAY & LIME									
129 135 CEMENTED SAND very HARD									
135 150 CLAY									
150 165 CLAY & LIME									
165 180 CLAY & LIME									
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/year) <u>5-18-88</u> and this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's License No. <u>473</u> This Water Well Record was completed on (mo/day/yr) <u>5-18-88</u>									
under the business name of <u>Tyler Water Well</u> by (signature) <u>Paul S. [Signature]</u>									
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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.									