

1 LOCATION OF WATER WELL: County: Barton	Fraction CSW ¼ ¼ ¼	Section Number 23	Township Number T 17 S	Range Number R 14W E/W
---	-----------------------	----------------------	---------------------------	---------------------------

Distance and direction from nearest town or city street address of well if located within city?

3½ W, 2½ N of Hoisington, Kansas

2 WATER WELL OWNER: Allan Hoffman  
 RR#, St. Address, Box # : Route 1  
 City, State, ZIP Code : Hoisington, Kansas 67544  
 Board of Agriculture, Division of Water Resources  
 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: 40 ft. ELEVATION: Unknown
--	--

Depth(s) Groundwater Encountered 1.25 ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL 25 ft. below land surface measured on mo/day/yr 10/29/91

Pump test data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

Est. Yield 10 gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

Bore Hole Diameter 8 in. to 40 ft., and \_\_\_\_\_ in. to \_\_\_\_\_ ft.

WELL WATER TO BE USED AS:

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	

5 Public water supply    8 Air conditioning    11 Injection well

Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No \_\_\_\_\_; If yes, mo/day/yr sample was submitted \_\_\_\_\_

Water Well Disinfected? Yes \_\_\_\_\_ No \_\_\_\_\_

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass		Threaded _____

Blank casing diameter 5 in. to 20 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.

Casing height above land surface 12 in., weight 2.8 lbs./ft. Wall thickness or gauge No. Sch. 40

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	11 Other (specify) _____
				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 20 ft. to 40 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From 20 ft. to 40 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.

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	In. Pasture _____

Direction from well?		LITHOLOGIC LOG	How many feet?		PLUGGING INTERVALS
FROM	TO		FROM	TO	
0	25	Clay			
25	40	Sand rock			

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) 10/29/91 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186 This Water Well Record was completed on (mo/day/yr) 11/30/91 under the business name of Kelly's Water Well Service by (signature) *[Signature]*

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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.