

1 LOCATION OF WATER WELL  
 County: LANE Fraction NE 1/4 NE 1/4 SW 1/4 Section Number 17 Township Number T 17 S Range Number R 28 E (W)

Distance and direction from nearest town or city? 5N, 1E, 5N Dighton, KS Street address of well if located within city?

2 WATER WELL OWNER: WILL LEIKER  
 RR#, St. Address, Box #: HOLLY, COLO.  
 City, State, ZIP Code: HOLLY, COLO.  
 Board of Agriculture, Division of Water Resources Application Number:

3 DEPTH OF COMPLETED WELL: 159 ft. Bore Hole Diameter: 20 in. to 159 ft., and ..... in. to ..... ft.  
 Well Water to be used as:  
 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well  
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  
 7 Lawn and garden only 10 Observation well  
 Well's static water level: 115 ft. below land surface measured on ..... month ..... day ..... year  
 Pump Test Data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield 300 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

4 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 dia: 12 in. to 119 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface: 12 in., weight ..... lbs./ft. Wall thickness or gauge No. 188  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 11 Other (specify) .....  
 2 Brass 4 Galvanized steel 6 Concrete tile 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 7 Torch cut 9 Drilled holes 10 Other (specify) .....  
 Screen-Perforation Dia: 12 in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Screen-Perforated Intervals: From 119 ft. to 159 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 Gravel Pack Intervals: From 10 ft. to 159 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

5 GROUT MATERIAL:  Neat cement 2 Cement grout 3 Bentonite 4 Other .....  
 Grouted Intervals: From 0 ft. to 10 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 What is the nearest source of possible contamination:  Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well  
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well  
 3 Lateral lines 6 Pit privy  Livestock pens 12 Insecticide storage 16 Other (specify below)  
 13 Watertight sewer lines  
 Direction from well: NORTH How many feet: 2800 ? Water Well Disinfected? Yes ..... No .....  
 Was a chemical/bacteriological sample submitted to Department? Yes  No  If yes, date sample was submitted ..... month ..... day ..... year: Pump Installed?  Yes  No  
 If Yes: Pump Manufacturer's name: VALLEY Model No. DLLO HP 30 Volts 490  
 Depth of Pump Intake: 157 ft. Pumps Capacity rated at 250 gal./min.  
 Type of pump:  Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on MAY month 16 day 1975 year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 256  
 This Water Well Record was completed on 7 month 29 day 80 year under the business name of WHINERY DRILLING 405 Antelope Scott City, Mo (signature) John Whinery

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		TO		LITHOLOGIC LOG	
	FROM	TO	FROM	TO	FROM	TO
	0	15	Soil	151	156	Yellow
	15	40	Clay	156	159	Blue Shale
	40	59	Gyp			
	59	65	Sandy clay			
	65	109	clay			
	109	121	Sand			
	121	127	clay			
	127	137	Sand			
	137	138	clay			
	138	139	Rock			
ELEVATION:	139	151	Coarse Sand			

Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft. 4. .... ft. (Use a second sheet if needed)

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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T 17 R 28 E (W) SEC. 17 N 1/4 NE 1/4 SE 1/4 SW 1/4