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|--|--|----------------|--|----------------|--|-----------------|--|--------------|--|
| 1 LOCATION OF WATER WELL: | | Fraction | | Section Number | | Township Number | | Range Number | |
| County: Harvey | | NW ¼ NW ¼ NE ¼ | | 29 | | T 23 S | | R 3 EW | |
| Distance and direction from nearest town or city street address of well if located within city? | | | | | | | | | |
| Hensley Oil, 203 W. Dean, Burton, Ks | | | | | | | | | |
| 2 WATER WELL OWNER: Phil Hoskinson | | | | | | | | | |
| RR#, St. Address, Box #: Box 138 | | | | | | | | | |
| City, State, ZIP Code: Burton, Ks SV-2 | | | | | | | | | |
| 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 20 ft. ELEVATION: 1450.93 | | | | | | | | | |
| Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft. | | | | | | | | | |
| WELL'S STATIC WATER LEVEL 15.71 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 8 in. to 20 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) | | | | | | | | | |
| 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well | | | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, mo/day/yr sample was submitted | | | | | | | | | |
| Water Well Disinfected? Yes No X | | | | | | | | | |
| 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 X | | | | | | | | | |
| Blank casing diameter 4 in. to 5 ft., Dia in. to ft., Dia in. to ft. | | | | | | | | | |
| Casing height above land surface 0 in., weight 2.071 lbs./ft. Wall thickness or gauge No. .237 | | | | | | | | | |
| 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) | | | | | | | | | |
| 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 5 ft. to 20 ft. From ft. to ft. | | | | | | | | | |
| From ft. to ft. From ft. to ft. | | | | | | | | | |
| GRAVEL PACK INTERVALS: From 4 ft. to 20 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 1 ft. to 4 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 CONTAMINATED SITE | | | | | | | | | |
| Direction from well? How many feet? | | | | | | | | | |
| FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS | | | | | | | | | |
| 0 1 Sandy silt & gravel | | | | | | | | | |
| 1 2 Clay | | | | | | | | | |
| 2 3 Silty fill sand | | | | | | | | | |
| 3 7.5 Sandy clay | | | | | | | | | |
| 7.5 20 Mixed sand, clayey and silty, loose | | | | | | | | | |
| 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) 11-18-03 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) 2-13-04 | | | | | | | | | |
| under the business name of Woofert Pump and Well Inc. by (signature) | | | | | | | | | |
| 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. | | | | | | | | | |