

Board of Agriculture, Division of Water Resources
Application Number:

4 DEPTH OF COMPLETED WELL **29** ft. **ELEVATION:** **2024.45 TOC**



5	TYPE OF BLANK CASING USED:	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued	Clamped
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Blank casing diameter 2 in. to 9 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface 0 in., weight .716 lbs./ft. Wall thickness or gauge No. .154

SCREEN OR PERFORATION OPENINGS ARE:

5	Gauzed wrapped	8	Saw cut	11	None (open hole)
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SCREEN-PERFORATED INTERVALS: From **9** ft. to **29** ft. From _____ ft. to _____ ft.

From		ft. to		ft. From		ft. to	

GRAVEL PACK INTERVALS: From 7 ft. to 29 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
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Grout intervals From 0 ft. to 2 ft. From 2 ft. to 7 ft. From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

10 Livestock pens	14 Abandoned water well
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1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/ Gas well

2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage **16** Other (specify below)

3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage	Contaminated site
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Direction from well?				How many feet?
FROM	TO	CODE	LITHOLOGIC LOG	

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1		Silty Clay			

1	5	Silty Clay Clayey Silt			
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5	10	Dark Brown Silty Clay			
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10	15	Clayey Silt to Silty Clay w/sand			
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15	20	Clayey Silty Sand			
20	20				

20	29	Sandy Clay to Clayey Silty Sand			
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[illegible]

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[illegible]

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged underground to the

was _____ was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and

completed on (mo/day/yr) 7-3-03 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) **2-6-04**

under the business name of **Woofter Pump & Well, Inc.** by (signature) *[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.
