1 LOCATIO	1 LOCATION OF WATER WELL:			Fraction			Section Number Township Nu			mber Range Number		
County:	Edw	/ards	SE	% NE	14 NE	1/4	20	T 24	S	R	16	€w
Distance an	d direction from	m nearest tow	n or city street	address of w	ell if located wit	hin city?				· · · · · · · · · · · · · · · · · · ·		
2 WATER WELL OWNER: Southern Plains Coop												
				Coop								
RR#, St. Address, Box # : PO Box 128 Board of Agriculture, Division of Water Resources												
City, State, ZIP Code : Lewis, KS 67552 Application Number:												
3 LOCATE	WELL'S LOC	ATON WITH	4			50						
AN "X" IN	N SECTION B	,	DEPTHO	F COMPLETE	ED WELL	50	ft. ELE	/ATION:				
	N		Depth(s) Gro	undwater Enc	ountered 1		ñ	. 2	ft.	3		ft.
1			WELL'S STA	TIC WATER L	EVEL 3	3.5 ft.	below land s	surface measured o	n mo/day	/yr		
L	NW	NE X	P	ump test data:	: Well water v	vas		t. after	hours	pumping		gpm
			Est. Yield	apm:	Well water v	vas	1	t, after	hours i	pumpina		apm
² / ₂ W E			Est, Yield gpm: Well water was ft. after hours pumping gpm r Bore Hole Dlameter 8.25 in. to 50 ft. and in. to ft.									
7			Bore Hole Diameter 8.25 in. to 50 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)									
	sw	. SF	1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)									
	j.,	j. I	2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well									
† L			Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, mo/day/yr sample was									
	s		submitted					ter Well Disinfected				
5 TYPE OF	F BLANK CAS			5 Wro	ight kon	8 Conce		CASING JOIN				
1 Ste					estos-Cement							
2 PV									The	ded		
		4 ABS		7 Fiber					ınre	aded		
Blank casing	g diameter _	-	in. to	30 R.,	Dia	in. t		ft., Dia Wall thickness or		in. to		ft.
Casing heig	ht above land	surface	0	in., weight		716	lbs./ft.	Wall thickness or	gauge No.	·	154	
TYPE OF S	CREEN OR P	EKFORATION	MATERIAL:			7	PVC	10 Asbe 11 Othe	stos-ceme	ent		
1 Ste		3 Stainle	ss steel	5 Fibe	rglass	8	RMP (SR)	11 Othe	r (specify)			
2 Bra				6 Cond	crete tile	. 9	ABŞ	12 None	used (op	en hole)		
		TION OPENIN						8 Saw cut		11 None (open h	ole)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)												
	vered shutter		Key punched		7 Torch o			10 Other (speci	īy)			
SCREEN-P	ERFORATED	INTERVALS:						rom				
					ft. to		ft. I	rom	ft.	to		ft.
GR	AVEL PACK II	NTERVALS:	From	33	ft. to	50	ft. f	rom	ft.	to		ft.
			From		ft. to		ft. f	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												
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Intervals From 0 ft. to 31 ft. From 31 ft. to 33 ft. From ft. to ft. to												
What is the	nearest source	e of possible o	ontamination:				10 Lives	tock pens	14 Ab	andoned wa	ter wel	
1 Ser	otic tank		4 Lateral lin	ies	7 Pit privy			storage	15 Oi	well/ Gas w	ell	
			5 Cess pool 8 Sewage lagoon				•					
	tertight sewer		6 Seepage		9 Feedvard	•		ticide storage	Co	ntamina	ted S	iite
Direction fro	•		- ccopage				How many				:::::	
FROM	TO	CODE	LITH	HOLOGIC LOC	3	FROM	TO		IGGING I	NTERVALS		
0	.5			br, firm,				Clayey, sat				
			nd & grav			50		BH				
.5	2			rd br, firr	n, damp							
2	4	Silt	ty clay, it	gy br, stiff								
			iche, fine									
4	17			-med, clay	ey,							
			liche, dan									
17	21			rd br, firm	, damp,							
			e gr									
21	33			, firm, dan	np							
		Sli	sandy									
33	34			rd br, f-me	ed, wet							
34	36		but sat									
36	50	Sa	nd, y br, f	-med, trc (ers /		L			·		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) obnstructed, (2) reconstructed, or (3) plugged under my jurisdiction and was												
•	on (mo/day/yr)			/30/07				rue to the best of m	•	•		
Water Well Contractor's License No. 554 This Water Well Record was completed on molday/yr) 6/18/07												
under the business name of Woofter Pump & Well Inc. by (signature)												
INSTRI	UCTIONS: Ple	ease fill in blanks	and circle the	correct answers	s. Send three co	pies to Kans	as Departme	nt of Health and Envi	nonment, B	ureau of Wate	r, 1000	SW
Jackso	n St., Ste. 420,	ropeka, Kansa	5 66612-1367.	reiepnone: 91	3-296-5545. Se	nd one to W/	TER WELL	OWNER and retain o	ne for your	records.		