

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number																																																																																																
County: Finney		C ¼ NE ¼ NE ¼	3	T 24 S	R 34 E W																																																																																																
Distance and direction from nearest town or city street address of well if located within city? ~1 mi. N and 2 mi. W of Holcomb on Hwy 50																																																																																																					
2 WATER WELL OWNER: NORTHERN NATURAL GAS																																																																																																					
RR#, St. Address, Box # : 451 S. COUNTRY ESTATES			Board of Agriculture, Division of Water Resources																																																																																																		
City, State, ZIP Code : LIBERAL, KS 67901			Application Number:																																																																																																		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 105 ft. ELEVATION: 0																																																																																																			
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.																																																																																																			
		WELL'S STATIC WATER LEVEL 89.29 ft. below land surface measured on mo/day/yr 12/6/2004																																																																																																			
		Pump test data: Well water was NA ft. after _____ hours pumping _____ gpm																																																																																																			
		Est. Yield NA gpm: Well water was _____ ft. after _____ hours pumping _____ gpm																																																																																																			
		Bore Hole Diameter 8 in. to 105 ft. and _____ in. to _____ ft.																																																																																																			
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well																																																																																																			
		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																																																																																																			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted																																																																																																			
		Water Well Disinfected? Yes _____ No <input checked="" type="checkbox"/>																																																																																																			
5 TYPE OF BLANK CASING USED:																																																																																																					
1 Steel		3 RMP (SR)		5 Wrought iron																																																																																																	
2 PVC		4 ABS		8 Concrete tile																																																																																																	
		7 Fiberglass		CASING JOINTS: Glued _____ Clamped _____																																																																																																	
Blank casing diameter 2 in. to 80 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.				Welded _____ Threaded <input checked="" type="checkbox"/>																																																																																																	
Casing height above land surface 29 in. weight _____ lbs./ft. Wall thickness or gauge No. Sch. 40																																																																																																					
TYPE OF SCREEN OR PERFORATION MATERIAL																																																																																																					
1 Steel		3 Stainless steel		5 Fiberglass																																																																																																	
7 PVC		10 Asbestos-cement		8 RMP (SR)																																																																																																	
2 Brass		4 Galvanized steel		11 Other (specify) _____																																																																																																	
		6 Concrete tile		9 ABS																																																																																																	
				12 None used (open hole)																																																																																																	
SCREEN OR PERFORATION OPENINGS ARE:																																																																																																					
1 Continuous slot		3 Mill slot		5 Gauzed wrapped																																																																																																	
2 Louvered shutter		4 Key punched		6 Wire wrapped																																																																																																	
				8 Saw cut																																																																																																	
				9 Drilled holes																																																																																																	
				10 Other (specify) _____																																																																																																	
				11 None (open hole)																																																																																																	
SCREEN-PERFORATED INTERVALS: From 80 ft. to 105 ft. From _____ ft. to _____ ft.																																																																																																					
GRAVEL PACK INTERVALS: From 77 ft. to 105 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 0 ft. to 3 ft. From 3 ft. to 77 ft. From _____ ft. to _____ ft.																																																																																																					
What is the nearest source of possible contamination:																																																																																																					
1 Septic tank		4 Lateral lines		7 Pit privy																																																																																																	
2 Sewer lines		5 Cess pool		8 Sewage lagoon																																																																																																	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard																																																																																																	
				10 Livestock pens																																																																																																	
				11 Fuel storage																																																																																																	
				12 Fertilizer storage																																																																																																	
				13 Insecticide storage																																																																																																	
				14 Abandoned water well																																																																																																	
				15 Oil well/Gas well																																																																																																	
				16 Other (specify below) _____																																																																																																	
Direction from well? _____ How many feet? 0																																																																																																					
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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) 11/10/2004 and this record is true to the best of my knowledge and belief.																																																																																																					
Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/yr) 1/3/05																																																																																																					
under the business name of GeoCore, Inc. by (signature) <i>Dale Rupp</i>																																																																																																					
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.																																																																																																					

OFFICE USE ONLY

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