

1 LOCATION OF WATER WELL:		Fraction	Section Number		Township Number	Range Number
County: Finney		NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$	T 24 S		R 34 W	Sec 32 E/W
Distance and direction from nearest town or city street address of well if located within city? Land Appl. MAA - Farm Fields T 24 S, R 34 W, Sec. 32						
2 WATER WELL OWNER: Tyson Foods						
RR#, St. Address, Box #			Board of Agriculture, Division of Water Resources			
City, State, ZIP Code: Garden City, Ks			Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 180 ft. ELEVATION:				
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.				
		WELL'S STATIC WATER LEVEL _____ 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 200 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
2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)
				7 Fiberglass		
Blank casing diameter 4 in. to 140 ft. Dia						CASING JOINTS: Glued _____ Clamped _____
Casing height above land surface 36 in., weight 2.071 lbs./ft.						Welded _____ Threaded _____
TYPE OF SCREEN OR PERFORATION MATERIAL:				7 PVC		10 Asbestos-cement
1 Steel		3 Stainless steel		8 RMP (SR)		11 Other (specify)
2 Brass		4 Galvanized steel		9 ABS		12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:				5 Gauzed wrapped		8 Saw cut
1 Continuous slot		3 Mill slot		6 Wire wrapped		11 None (open hole)
2 Louvered shutter		4 Key punched		7 Torch cut		9 Drilled holes
						10 Other (specify)
SCREEN-PERFORATED INTERVALS: From 140 ft. to 180 ft.						
GRAVEL PACK INTERVALS: From 137 ft. to 180 ft.						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____						
Grout intervals From 0 ft. to 134 ft. From 134 ft. to 137 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
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage
						13 Insecticide storage
						14 Abandoned water well
						15 Oil well/ Gas well
						16 Other (specify below)
						Contaminated site
Direction from well? _____ How many feet? _____						
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	13		Fine sand			Clay strks
13	31		Sandy clay	125	130	Sandy clay
31	37		Fine sand	130	140	Fine to med sand & gravel w/sandy
37	41		Sandy clay			Clay strks
41	58		Med sd & gravel w/sandy clay	140	170	Fine to med sd & some gravel w/
			Lens			Sandy clay lens
58	75		Sandy clay w/caliche & sand	170	181	Sandy clay
			Lens	181	187	Fine to some med sd w/sandy clay
75	87		fine to med sand & gravel			Strks
87	99		Sandy clay	187	200	Fine to some med sand w/lots of
99	110		Fine to some med sand w/sandy			Sandy clay
			Clay strks			
110	118		Sandy clay			
118	125		Fine to some med sd/w/sandy			
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) 5-17-05 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) 6-30-05			
under the business name of Woofert Pump & Well Inc.			by (signature) <i>[Signature]</i>			
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.						

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