

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number																																																																																																										
County: Finney		NW ¼ NW ¼ NW ¼		T 24 S		R 34 W		Sec 32																																																																																																										
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, Sect. 32																																																																																																																		
2 WATER WELL OWNER: Tyson Foods																																																																																																																		
RR#, St. Address, Box # : City, State, ZIP Code : Garden City, Ks																																																																																																																		
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 150 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 160 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 _____																																																																																																																		
Blank casing diameter 4 in. to 110 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.																																																																																																																		
Casing height above land surface 36 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 8 RMP (SR) 10 Asbestos-cement																																																																																																																		
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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 110 ft. to 150 ft. From _____ ft. to _____ ft.																																																																																																																		
GRAVEL PACK INTERVALS: From 108 ft. to 150 ft. From _____ ft. to _____ ft.																																																																																																																		
6 GROUT MATERIAL:																																																																																																																		
1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____																																																																																																																		
Grout intervals From 0 ft. to 105 ft. From 105 ft. to 108 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? _____																																																																																																																		
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>CODE</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>1</td> <td></td> <td>surface</td> <td></td> <td></td> <td>With a few fine sand strks</td> </tr> <tr> <td>1</td> <td>17</td> <td></td> <td>Fine sand</td> <td>152</td> <td>160</td> <td>Clay w/sandy clay strks</td> </tr> <tr> <td>17</td> <td>22</td> <td></td> <td>Fine to med sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>22</td> <td>30</td> <td></td> <td>Med sand & gravel</td> <td></td> <td></td> <td></td> </tr> <tr> <td>30</td> <td>44</td> <td></td> <td>Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>44</td> <td>50</td> <td></td> <td>fine sand w/clay lens</td> <td></td> <td></td> <td></td> </tr> <tr> <td>50</td> <td>67</td> <td></td> <td>Fine to med sand & some</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>Gravel w/clay lens</td> <td></td> <td></td> <td></td> </tr> <tr> <td>67</td> <td>81</td> <td></td> <td>Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>81</td> <td>111</td> <td></td> <td>clay w/caliche lens</td> <td></td> <td></td> <td></td> </tr> <tr> <td>111</td> <td>133</td> <td></td> <td>Fine to some med sdy clay strk</td> <td></td> <td></td> <td></td> </tr> <tr> <td>133</td> <td>141</td> <td></td> <td>Fine to some med sd w/sandy</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>Clay & caliche strks</td> <td></td> <td></td> <td></td> </tr> <tr> <td>141</td> <td>152</td> <td></td> <td>Sandy clay, clay, caliche</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>										FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	1		surface			With a few fine sand strks	1	17		Fine sand	152	160	Clay w/sandy clay strks	17	22		Fine to med sand				22	30		Med sand & gravel				30	44		Clay				44	50		fine sand w/clay lens				50	67		Fine to med sand & some							Gravel w/clay lens				67	81		Clay				81	111		clay w/caliche lens				111	133		Fine to some med sdy clay strk				133	141		Fine to some med sd w/sandy							Clay & caliche strks				141	152		Sandy clay, clay, caliche			
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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/yr) 5-14-05 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) _____																																																																																																																		
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: 913-298-5545. Send one to WATER WELL OWNER and retain one for your records.																																																																																																																		

OFFICE USE ONLY

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