

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Greeley</u>		<u>NE 1/4 NE 1/4 SW 1/4</u>	<u>26</u>	<u>T 26 S</u>	<u>R 27 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>From Howell, 1 1/2 mile south to river rd, then 3 miles west, 1 south 1/2 east.</u>					
2 WATER WELL OWNER: <u>Lon Pacheco</u>					
RR#, St. Address, Box # : <u>24305 Q Rd</u>				Board of Agriculture, Division of Water Resources	
City, State, ZIP Code : <u>Cimarron, N.M. 87835</u>				Application Number:	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: ft. ELEVATION: ft.			
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>74'</u> ft. below land surface measured on mo/day/yr <u>4-2-96</u>			
		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 <u>9 1/8</u> in. to <u>24 1/2</u> in. ft. and in. to ft.			
		WELL WATER TO BE USED AS:			
		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 <u>X</u>; If yes, mo/day/yr sample was submitted			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
<u>2 PVC</u>		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
Blank casing diameter <u>5</u> in. to <u>22 1/2</u> ft., Dia in. to ft., Dia in. to ft.		8 Concrete tile			
Casing height above land surface <u>12</u> in., weight lbs./ft. Wall thickness or gauge No. <u>SDR21</u>		9 Other (specify below)			
TYPE OF SCREEN OR PERFORATION MATERIAL:		CASING JOINTS: Glued <u>X</u> Clamped			
1 Steel		3 Stainless steel		5 Fiberglass	
<u>2 Brass</u>		4 Galvanized steel		6 Concrete tile	
				7 RMP (SR)	
				8 ABS	
				9 Other (specify)	
				10 Asbestos-cement	
				11 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped			
1 Continuous slot		3 Mill slot		<u>6 Saw cut</u>	
2 Louvered shutter		4 Key punched		7 Drilled holes	
				8 Other (specify)	
SCREEN-PERFORATED INTERVALS:		5 Wire wrapped			
From <u>22 1/2</u> ft. to <u>24 1/2</u> ft., From ft. to ft.		6 Torch cut			
From ft. to ft., From ft. to ft.		7 Other (specify)			
GRAVEL PACK INTERVALS:		8 Other (specify)			
From <u>24'</u> ft. to <u>150</u> ft., From <u>155</u> ft. to <u>245</u> ft.					
From ft. to ft., From ft. to ft.					
6 GROUT MATERIAL:					
1 Neat cement		2 Cement grout		<u>3 Bentonite</u>	
4 Other					
Grout Intervals: From <u>4</u> ft. to <u>24</u> ft., From <u>130</u> ft. to <u>135</u> ft., From ft. to ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines		<u>7 Livestock pens</u>	
2 Sewer lines		5 Cess pool		8 Fuel storage	
3 Watertight sewer lines		6 Seepage pit		9 Fertilizer storage	
				10 Insecticide storage	
				11 Abandoned water well	
				12 Oil well/Gas well	
				13 Other (specify below)	
Direction from well? <u>Southwest</u>		How many feet? <u>20'</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	<u>Sandy topsoil</u>			
2	5	<u>Fine sand</u>			
5	30	<u>Med. sand</u>			
30	43	<u>Brown clay</u>			
43	61	<u>Brown sandy clay</u>			
61	62	<u>Sandrock ledge</u>			
62	84	<u>Brown sandy clay</u>			
84	87	<u>Med. sand</u>			
87	100	<u>White clay</u>			
100	115	<u>Med. sand</u>			
115	119	<u>Brown clay</u>			
119	133	<u>Med. sand</u>			
133	135	<u>Brown clay</u>			
135	167	<u>Fine to med. sand</u>			
167	240	<u>Med. sand + yellow clay w/strata</u>			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>4-2-96</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>533</u> This Water Well Record was completed on (mo/day/yr) <u>6-6-96</u> under the business name of <u>San Juan Water Well Repair</u> by (signature) <u>[Signature]</u>					
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.					