

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <b>Stevens</b>		<b>NE</b> <b>NW</b> $\frac{1}{4}$ <b>NE</b> $\frac{1}{4}$	<b>16</b>	<b>T 33 S</b>	<b>R 37</b> <b>EW</b>
Distance and direction from nearest town or city street address of well if located within city?					
2 WATER WELL OWNER: <b>Collingwood Grain</b>					
RR#, St. Address, Box # : <b>500 NW Ave</b>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <b>Hugoton, KS 67051</b>			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <b>150</b> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.			
		WELL'S STATIC WATER LEVEL <b>123.39</b> ft. below land surface measured on mo/day/yr <b>9-15-05</b>			
		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 <b>8</b> in. to <b>151.5</b> ft. and _____ in. to _____ ft.		WELL WATER TO BE USED AS:			
1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)		5 Public water supply 8 Air conditioning 11 Injection well			
2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was submitted _____					
Water Well Disinfected? Yes _____ No <b>X</b>					
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below)		5 Wrought Iron 8 Concrete tile		CASING JOINTS: Glued _____ Clamped _____	
2 PVC 4 ABS 7 Fiberglass				Welded _____ Threaded <b>X</b>	
Blank casing diameter <b>4</b> in. to <b>90</b> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height above land surface <b>0</b> in., weight <b>2.071</b> lbs./ft. Wall thickness or gauge No. <b>.237</b>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)		2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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) <b>CONTAMINATED SITE</b>					
SCREEN-PERFORATED INTERVALS: From <b>90</b> ft. to <b>150</b> ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <b>87</b> ft. to <b>150</b> ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____					
Grout Intervals From <b>0</b> ft. to <b>84</b> ft. From <b>84</b> ft. to <b>87</b> 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)	
				<b>CONTAMINATED SITE</b>	
Direction from well? _____ How many feet? _____					
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
<b>0</b>	<b>2</b>		<b>Surface</b>	<b>142</b>	<b>151.5</b>
<b>2</b>	<b>12</b>		<b>Fine sand</b>	<b>Sandy clay, sandstone &amp; caliche</b>	
<b>12</b>	<b>24</b>		<b>Clay</b>		
<b>24</b>	<b>47</b>		<b>Fine sand &amp; sandy clay</b>		
<b>47</b>	<b>55</b>		<b>Fine to med sand</b>		
<b>55</b>	<b>63</b>		<b>Clay</b>		
<b>63</b>	<b>74</b>		<b>Fine sand &amp; sandy clay (tight)</b>		
<b>74</b>	<b>85</b>		<b>Fine to some med sd w/sandy</b>		
			<b>Clay</b>		
<b>85</b>	<b>101</b>		<b>Clay &amp; caliche</b>		
<b>101</b>	<b>130</b>		<b>caliche &amp; clay</b>		
<b>130</b>	<b>136</b>		<b>Sandy clay w/sandstone &amp; caliche</b>		
<b>136</b>	<b>142</b>		<b>Caliche &amp; clay</b>		
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) <b>9-14-05</b> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <b>554</b>			This Water Well Record was completed on (mo/day/yr) <b>9-23-05</b>		
under the business name of <b>Woofter Pump &amp; Well Inc.</b>			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: 913-298-5545. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

T

R

SEC