

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Decatur		NE 1/4 NE 1/4 NE 1/4		2		T 3 S		R 29 E/W	
Distance and direction from nearest town or city street address of well if located within city?									
Hwy 83 & Hwy 36 Southwest Corner of Intersection									
2 WATER WELL OWNER: Elmer Kathka									
RR#, St. Address, Box # : Rt. 3 Box 6A									
City, State, ZIP Code : Oberlin, Kansas 67749 B-9 MW #8									
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: 105 ft. ELEVATION:									
Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.									
WELL'S STATIC WATER LEVEL 89 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 . . . 6 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. 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. X									
Blank casing diameter in. to . . . 7.5 ft., Dia in. to . . . ft., Dia in. to . . . ft.									
Casing height above land surface . . 0 in., weight 716 lbs./ft. Wall thickness or gauge No. . 154									
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 . . . 75 ft. to . . . 105 ft., From . . . ft. to . . . ft.									
From . . . ft. to . . . ft., From . . . ft. to . . . ft.									
GRAVEL PACK INTERVALS: From . . . 72 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 . . . 4 ft., From . . . 4 ft. to . . . 72 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 Removed Fuel Storage									
Direction from well? How many feet?									
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
0 2 Surface									
2 20 Loess									
20 30 Sandy Clay w/Caliche Strks.									
30 50 Sandy Clay & Caliche									
50 60 Sandy Clay & Caliche w/Sand Mix									
60 70 Sandy Clay & Caliche									
70 80 Sandy Clay w/Some Caliche Strks.									
80 90 Sandy Clay W/Caliche & Sand									
90 105 Sand & Gravel									
105 Shale									
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) . . . 2-18-94 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) . . . 9-23-94									
under the business name of Woofter Pump & Well, Inc. by (signature) Jay C. Woofter									
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.									