

1 LOCATION OF WATER WELL: County: <b>PHILLIPS</b>	Fraction <b>SW 1/4 NW 1/4 SW 1/4</b>	Section Number <b>2</b>	Township Number <b>T 4 S</b>	Range Number <b>R 12 E/W</b>
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Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: <b>Mrs Huck Boyd</b> RR#, St. Address, Box #: <b>451 3rd</b> City, State, ZIP Code: <b>Phillipsburg, KS 67661</b>	Board of Agriculture, Division of Water Resources Application Number:
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <b>32</b> ft. ELEVATION:
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Depth(s) Groundwater Encountered 1. **32 1/2** ft. 2. **1" of water** ft. 3. **3/13/91** ft.

WELL'S STATIC WATER LEVEL **32 1/2** 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 \_\_\_\_\_ in. to \_\_\_\_\_ 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 \_\_\_\_\_; If yes, mo/day/yr sample was submitted \_\_\_\_\_

Water Well Disinfected? Yes \_\_\_\_\_ No \_\_\_\_\_

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
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1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) **Top RED TILE, Brick Below 4' Concrete, Plaster 35'**

2 PVC 4 ABS 7 Fiberglass

Blank casing diameter **43** in. to **32** ft., Dia \_\_\_\_\_ in. weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No. \_\_\_\_\_

Casing height above land surface \_\_\_\_\_ in.

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)	

SCREEN-PERFORATED INTERVALS: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other _____
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Grout Intervals: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ 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>Underground cellar</b>
			13 Insecticide storage	

Direction from well? **WEST**

How many feet? **14**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
			<b>32</b>	<b>31 1/2</b>	<b>Chlorinated Sand</b>
			<b>31 1/2</b>	<b>4 1/2</b>	<b>Subsoil Clay</b>
			<b>4 1/2</b>	<b>3 1/2</b>	<b>Bentonite - Hole Plug</b>
			<b>3 1/2</b>	<b>0</b>	<b>SOIL</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/year) <b>3/13/91</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) <b>3/13/91</b> under the business name of _____ by (signature) <b>Dan H. Rogers</b>
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