

1 LOCATION OF WATER WELL: County: <u>Decatur</u>		Fraction: <u>SE 1/4 NE 1/4 NW 1/4</u>		Section Number: <u>32</u>		Township Number: <u>4</u>		Range Number: <u>27</u>		EW <u>27</u>																																																																
Distance and direction from nearest town or city street address of well if located within city?																																																																										
2 WATER WELL OWNER: <u>Ritter Brothers</u> # <u>2</u>																																																																										
RR#, St. Address, Box # : <u>HC 1, Box 60</u> Board of Agriculture, Division of Water Resources																																																																										
City, State, ZIP Code : <u>Jennings, Ks 67643</u> Application Number: <u>10,794</u>																																																																										
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:				4 DEPTH OF COMPLETED WELL <u>58</u> ft. ELEVATION:																																																																						
				Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL <u>16</u> 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 <u>28</u> in. to <u>58</u> 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 ☒ If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes ☒ No _____																																																																						
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 <u>16</u> in. to <u>38</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface <u>24</u> in., weight <u>16.15</u> lbs./ft. Wall thickness or gauge No. <u>.500</u>																																																																										
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 <u>38</u> ft. to <u>58</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>58</u> 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 <u>0</u> ft. to <u>20</u> 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) <u>none</u> 13 Insecticide storage																																																																										
Direction from well? _____ How many feet? _____																																																																										
<table border="1"><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>3</td><td></td><td>Surface</td><td></td><td></td><td></td></tr><tr><td>3</td><td>14</td><td></td><td>Loess</td><td></td><td></td><td></td></tr><tr><td>14</td><td>29</td><td></td><td>Fine to med sd & gravel w/fine Clay lens</td><td></td><td></td><td></td></tr><tr><td>29</td><td>32</td><td></td><td>Sandy clay w/sand strk</td><td></td><td></td><td></td></tr><tr><td>32</td><td>39</td><td></td><td>Med sand & gravel w/fine clay Lens - fairly loose</td><td></td><td></td><td></td></tr><tr><td>39</td><td>41</td><td></td><td>Sandy clay w/med sand strk</td><td></td><td></td><td></td></tr><tr><td>41</td><td>48</td><td></td><td>Med sand & gravel w/clay lens- Loose</td><td></td><td></td><td></td></tr><tr><td>48</td><td>58</td><td></td><td>Ochre & shale</td><td></td><td></td><td></td></tr></tbody></table>												FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	3		Surface				3	14		Loess				14	29		Fine to med sd & gravel w/fine Clay lens				29	32		Sandy clay w/sand strk				32	39		Med sand & gravel w/fine clay Lens - fairly loose				39	41		Sandy clay w/med sand strk				41	48		Med sand & gravel w/clay lens- Loose				48	58		Ochre & shale			
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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) <u>4-26-04</u> and this record is true to the best of my knowledge and belief. Kansas																																																																										
Water Well Contractor's License No. <u>554</u> This Water Well Record was completed on (mo/day/yr) <u>6-21-04</u>																																																																										
under the business name of <u>Woofter Pump & Well, Inc.</u> by (signature) <u>[Signature]</u>																																																																										
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send 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.																																																																										