

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Decatur		NW $\frac{1}{4}$ SE $\frac{1}{4}$ NE $\frac{1}{4}$	17	T 5 S	R 29 EW
Distance and direction from nearest town or city street address of well if located within city?					
2 WATER WELL OWNER: Brantley Farms					
RR#, St. Address, Box # : Box 167					
City, State, ZIP Code : Selden Ks 67757					
Board of Agriculture, Division of Water Resources Application Number: Supply No. 1					
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 na 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 8 in. to 105 ft. and _____ in. to _____ ft.			
WELL WATER TO BE USED AS:		5 Public water supply 1 Domestic 3 Feed lot 6 Oil field water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 9 Dewatering 12 Other (Specify below)			
Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was submitted _____					
Water Well Disinfected? Yes X No _____					
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued X Clamped 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____					
Blank casing diameter 4.5 in. to 65 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height above land surface 18 in., weight 2.38 lbs./ft. Wall thickness or gauge No. .248					
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 65 ft. to 105 ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 20 ft. to 105 ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grout Intervals From 0 ft. to 20 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) none 13 Insecticide storage					
Direction from well? _____ How many feet? _____					
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
0	2		Surface	100	105
2	10		Loess		
10	15		Clay		
15	30		Clay		
30	40		Clay		
40	45		Clay w/sand strks		
45	48		Clay w/sand strks		
48	60		Clay		
60	63		Clay		
63	73		Clay w/sand strks		
73	75		Clay w/sand strks & sandstone		
75	88		Clay		
88	90		Fine & med sand		
90	100		Fine & med sand w/some gravel		
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) 1-14-06 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) 1-18-06					
under the business name of Woofert Pump & Well Inc. 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: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

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