

| | | | | |
|---------------------------|---|----------------|-----------------|-----------------------|
| 1 LOCATION OF WATER WELL: | Fraction | Section Number | Township Number | Range Number |
| County: Rawlins | SW $\frac{1}{4}$ NW $\frac{1}{4}$ NE $\frac{1}{4}$ | 23 | T 5 S | R 36 EW |

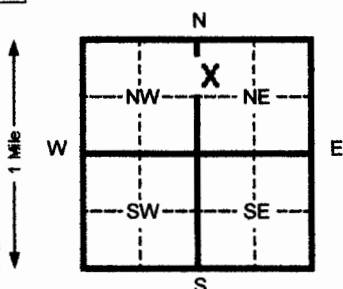
Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: **AB Fisher**RR#, St. Address, Box # : **HC 2**

Board of Agriculture, Division of Water Resources

City, State, ZIP Code : **McDonald, KS 67745**Application Number: **20070003**

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF COMPLETED WELL **200** ft. ELEVATION:

Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.

WELL'S STATIC WATER LEVEL _____ 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 **200** 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 wellWas 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 _____

☒ 1 Steel ☐ 3 RMP (SR) ☐ 6 Asbestos-Cement ☐ 9 Other (specify below) _____ Welded _____☒ 2 PVC ☐ 4 ABS ☐ 7 Fiberglass _____ Threaded _____Blank casing diameter **4.5** in. to **160** ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.Casing height above land surface **18** in., weight **2.384** lbs./ft. Wall thickness or gauge No. **.248**

TYPE OF SCREEN OR PERFORATION MATERIAL:

☐ 1 Steel ☐ 3 Stainless steel ☐ 5 Fiberglass ☒ 7 PVC ☐ 10 Asbestos-cement☐ 2 Brass ☐ 4 Galvanized steel ☐ 6 Concrete tile ☐ 8 RMP (SR) ☐ 11 Other (specify) _____SCREEN OR PERFORATION OPENINGS ARE: ☐ 4 Gauzed wrapped ☒ 8 Saw cut ☐ 11 None (open hole)☐ 1 Continuous slot ☐ 3 Mill slot ☐ 6 Wire wrapped ☐ 9 Drilled holes☐ 2 Louvered shutter ☐ 4 Key punched ☐ 7 Torch cut ☐ 10 Other (specify) _____SCREEN-PERFORATED INTERVALS: From **160** ft. to **200** ft. From _____ ft. to _____ ft.

From _____ ft. to _____ ft. From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **20** ft. to **200** 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 **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**

Direction from well?

How many feet?

| FROM | TO | CODE | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|-----|------|--|------|-----|---------------------------------------|
| 0 | .5 | | Surface | 107 | 109 | Caliche |
| .5 | 5 | | Cemented Sand | 109 | 120 | Fine sand w/clay & caliche |
| 5 | 25 | | Sandstone | 120 | 128 | Fine sand w/ caliche lens |
| 25 | 35 | | Fine Sand | 128 | 130 | Caliche |
| 35 | 44 | | Sandstone | 130 | 135 | Fine sand w/c;ay & caliche lens |
| 44 | 62 | | Sandstone & caliche w/ fine Sand str | 135 | 165 | Fine to some med sand w/ caliche Lens |
| 62 | 73 | | Fine to some med sand | 165 | 170 | Clay |
| 73 | 80 | | Clay with sand str & caliche | 170 | 173 | Fine to some med sand |
| 80 | 89 | | Fine to some sand w/clay & Caliche | 173 | 177 | Caliche w/sand str |
| 89 | 97 | | Sandstone & clay | 177 | 195 | Fine sand |
| 97 | 107 | | Fine to some med sand w/clay & caliche str | 195 | 200 | Yellow & grey 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/yr) **12/26/06** and this record is true to the best of my knowledge and belief. KansasWater Well Contractor's License No. **554**This Water Well Record was completed on (mo/day/yr) **1/11/07**

under the business name of

Woofert Pump & Wellby (signature) *John Woofert*

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.