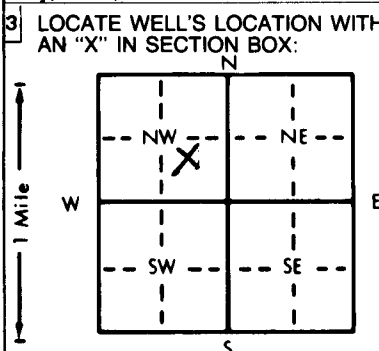


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: Graham	Fraction NW 1/4 SE 1/4 NW 1/4	Section Number 15	Township Number T 6 S	Range Number R 24 EW
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Distance and direction from nearest town or city street address of well if located within city?
12 miles North, 3/4 mi. West, 1/2 mile South of Penokee

2 WATER WELL OWNER: **Eugene David Murfin Drilling, Inc.**
 RR#, St. Address, Box # : **Lenora, Ks. Box 661** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **66448 Colby, Ks. 67701** Application Number: **940010**



4 DEPTH OF COMPLETED WELL: **210** ft. ELEVATION: _____

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

WELL'S STATIC WATER LEVEL **142** 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 **210** 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
2 Irrigation	4 Industrial	7 Lawn and garden only
		9 Dewatering
		10 Monitoring well
		12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X** _____; If yes, mo/day/yr sample was sub-
 mitted _____ 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 X Clamped _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass		Threaded _____

Blank casing diameter **4.5** in. to **170** 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)	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 **170** ft. to **210** ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **20** ft. to **210** 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)
			13 Insecticide storage	

Direction from well? **Southwest** How many feet? **200**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Surface	125	137	Med. Sand/Clay Strks.
3	16	Clay	137	138	Caliche
16	35	Fine Sand w/Caliche Strks.	138	140	Clay
35	39	Caliche w/Clay Strks.	140	144	Med. Sand
39	47	Sandstone w/Clay Strks.	144	151	Clay
47	49	Clay	151	154	Sand & Clay Strks.
49	52	Caliche	154	164	Clay & Sand Strks.
52	58	Sandstone	164	176	Fine Sand
58	84	Caliche Clay & Cemented Sand	176	184	Clay & Sand Strks.
84	96	Fine Sand w/Caliche Strks.	184	196	Med. Sand
96	98	Clay & Caliche	196	205	Clay & Sand Strks.
98	105	Fine to Med. Sand	205	210	Ochre
105	107	Clay & Caliche			
107	117	Caliche & Sandstone & Clay St.			
117	125	Clay & Caliche			

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) **1-12-94** 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) **1-13-94** under the business name of **Woofter Pump & Well, Inc.** by (signature) *Gary 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.