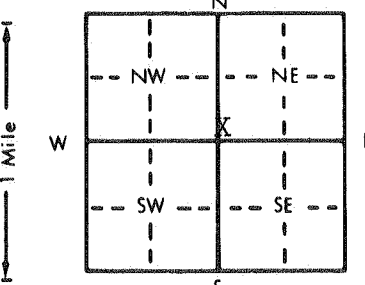


1 LOCATION OF WATER WELL: Fraction SW 1/4 SW 1/4 NE 1/4 Section Number 16 Township Number T 7 S Range Number R 30 E/W  
 County: Sheridan

Distance and direction from nearest town or city street address of well if located within city?  
 11 West 5 North 1 West 1/2 South of Hoxie

2 WATER WELL OWNER: Jim Beckman  
 RR#, St. Address, Box # : Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : Selden, KS 67757 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
  
 4 DEPTH OF COMPLETED WELL: 162 ft. ELEVATION:  
 Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft.  
 WELL'S STATIC WATER LEVEL . . . 99 . . . . . ft. below land surface measured on mo/day/yr . . . 2-16-87 . . . . .  
 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 . . . . 9 . . . . in. to . . . . 162 . . . . 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 9 Dewatering 12 Other (Specify below)  
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well  
 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 . . . . 5 . . . . in. to . . . . 142 . . . . ft., Dia . . . . in. to . . . . ft., Dia . . . . in. to . . . . ft.  
 Casing height above land surface . . . . 12 . . . . in., weight . . . . 2.81 . . . . lbs./ft. Wall thickness or gauge No. . . . 265 . . . .  
 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) . . . . .  
 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 . . . . 142 . . . . ft. to . . . . 162 . . . . ft., From . . . . ft. to . . . . ft.  
 From . . . . ft. to . . . . ft., From . . . . ft. to . . . . ft.  
 GRAVEL PACK INTERVALS: From . . . . 15 . . . . ft. to . . . . 162 . . . . 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 . . . . 5 . . . . ft. to . . . . 15 . . . . 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? West How many feet? 100

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	15	Surface	131	141	Medium Sand & Gravel
15	20	Clay	141	147	Caliche
20	25	Medium Sand	147	159	Medium Sand
25	30	Clay	159	163	Ochre
30	39	Medium Sand			
39	45	Caliche			
45	50	Clay			
50	60	Caliche			
60	75	Clay			
75	80	Medium Sand			
80	105	Caliche			
105	110	Medium Sand			
110	123	Clay			
123	130	Medium Sand			
130	131	Clay			

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) . . . . 2-16-87 . . . . . and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . . . . 394 . . . . . This Water Well Record was completed on (mo/day/yr) . . . . 6-28-87 . . . . . under the business name of Woofter Pump & Well by (signature) *Walter Wolfe*

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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.