

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Thomas		$\frac{1}{4}$ S $\frac{1}{2}$ $\frac{1}{4}$ SW	6	T 7 S	R 31
Distance and direction from nearest town or city street address of well if located within city?					
2 WATER WELL OWNER: Alvin Depe					
RR#, St. Address, Box # : 1743 County Rd M			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Colby, Ks 67701			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 117 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 115 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 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	
2 PVC		4 ABS		8 Concrete tile	
				CASING JOINTS: Glued X Clamped _____	
				Welded _____	
				Threaded _____	
Blank casing diameter 5 in. to 97 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height above land surface 18 in., weight 2.355 lbs./ft. Wall thickness or gauge No. .214					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		8 RMP (SR)	
				10 Asbestos-cement	
				11 Other (specify) _____	
				12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		3 Mill slot		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
				7 Torch cut	
				8 Saw cut	
				9 Drilled holes	
				10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS: From 97 ft. to 117 ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 20 ft. to 117 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	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/ Gas well	
				16 Other (specify below) none	
Direction from well? _____ How many feet? _____					
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
0	2		Surface	115	Yellow ochre
2	20		Loess		
20	30		Clay		
30	36		Fine to med sand & gravel		
36	40		Caliche & cemented sand		
40	54		Fine to some med sd w/ Cemented sand strks		
54	57		Caliche		
57	66		Fine to some med sand		
66	72		Fine sand w/sandstone strk		
72	76		Caliche & sandstone		
76	81		Fine to med sand		
81	100		Caliche & cemented sand		
100	115		Fine to med sand		
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) 6-5-06 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) 6-9-06 under the business name of 554 by (signature) <i>Alvin Depe</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.					

OFFICE USE ONLY

T

R

SEC