

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Thomas	NW $\frac{1}{4}$ SW $\frac{1}{4}$ SE $\frac{1}{4}$	31	T 7 S	R 33

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

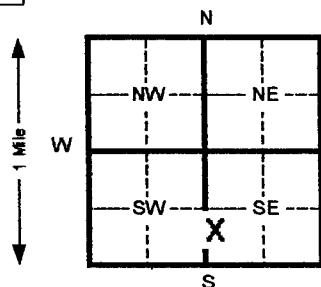
Colby Conoco, 320 W. 4th, Colby, Ks 67701 tag 003533602 WATER WELL OWNER: **Tom Waldschmidt**RR#, St. Address, Box # : **P. O. Box 446**

Board of Agriculture, Division of Water Resources

City, State, ZIP Code : **Colby, Ks 67701****MW # 2**

Application Number:

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



4 DEPTH OF COMPLETED WELL

125 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 **125** 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 **X** If yes, mo/day/yr sample was submitted _____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 _____ Clamped _____

2 PVC

4 ABS

6 Asbestos-Cement

9 Other (specify below)

Welded _____

7 Fiberglass

Threaded **X**Blank casing diameter **4** in. to **95** ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.Casing height above land surface **0** in., weight **2.071** lbs./ft. Wall thickness or gauge No. **.237**

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 **95** ft. to **125** ft. From _____ ft. to _____ ft.

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

GRAVEL PACK INTERVALS: From **95** ft. to **125** 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 **2** ft. From **2** ft. to **92** 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

Contaminated site

Direction from well?

How many feet?

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	.5		Cement			And caliche strks, tight
.5	3		Fill sand	116	125	Fine to medium grained sand
3	4		Broken cement			
4	17		Fill, loose			
17	29		Loess			
29	49		Clayey silt & caliche, sandy			
			Some sand streaks			
49	76		Loose sand & gravel, some			
			Large gravel & clay strks			
76	89		Sandy clay & caliche			
89	98		Fine to medium grained sd,			
			Some caliche			
98	105		Sandy clay and caliche			
105	116		Fine to med grained sd, w/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/yr) **10-28-02**

and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. **654**This Water Well Record was completed on (mo/day/yr) **12-20-03**

under the business name of

Woofert Pump and Well Inc.

by (signature)

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send 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.