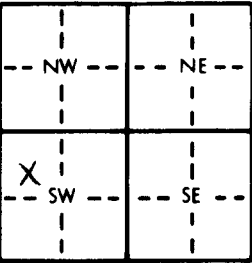


1 LOCATION OF WATER WELL: County: <u>THOMAS</u> Distance and direction from nearest town or city street address of well if located within city? <u>4 N 3 E OF COLBY</u>		Fraction <u>NC 1/4 NW 1/4 SW 1/4</u>		Section Number <u>10</u>	Township Number <u>T 7 S</u>	Range Number <u>R 33 E</u>
2 WATER WELL OWNER: <u>PAUL CERSOUSKY</u> RR#, St. Address, Box #: <u>435 W. 7TH</u> City, State, ZIP Code: <u>COLBY, KS 67701</u> Board of Agriculture, Division of Water Resources Application Number: <u>17990</u>						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		4 DEPTH OF COMPLETED WELL X. <u>200</u> ft. ELEVATION: Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL X. <u>UNK</u> 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 in. to 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) <u>2</u> Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well Was 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: X <u>1</u> 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 Blank casing diameter <u>16</u> in. to ft., Dia. in. to ft., Dia. in. to ft. Casing height above land surface in., weight lbs./ft. Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 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 ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.						
6 GROUT MATERIAL: 1 Neat cement <u>2</u> Cement grout 3 Bentonite 4 Other Grout Intervals: From <u>30</u> ft. to <u>5</u> 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 <u>16</u> Other (specify below) <u>NONE</u> 13 Insecticide storage Direction from well? How many feet? FROM TO LITHOLOGIC LOG FROM TO X PLUGGING INTERVALS <u>200</u> <u>30</u> <u>SAND</u> <u>30</u> <u>5</u> <u>CEMENT</u> <u>5</u> <u>0</u> <u>top soil</u>						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or <u>3</u> plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/yr) X. <u>2-8-89</u> under the business name of by (signature) <u>Paul Cersousky</u>						
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.						

OFFICE USE ONLY

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