

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: Thomas		SE 1/4 NW 1/4 NW 1/4	19	T 7 S	R 33 E W
Distance and direction from nearest town or city? 2 1/2 N Colby, Ks.			Street address of well if located within city?		

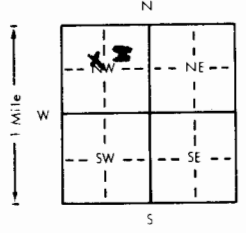
2 WATER WELL OWNER: Bill Draper		Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # :		Application Number:
City, State, ZIP Code : Colby, Ks.		

3 DEPTH OF COMPLETED WELL. 220 ft. Bore Hole Diameter. 9 in. to 220 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
Well's static water level 112 ft. below land surface measured on 4 month 5 day 78 year	
Pump Test Data	Well water was . . . ft. after . . . hours pumping. . . gpm
Est. Yield	Well water was . . . ft. after . . . hours pumping. . . gpm

4 TYPE OF BLANK CASING USED:		5 Wrought iron	8 Concrete tile	Casing Joints: <u>Glued</u> . . . Clamped . . .
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded . . .
2 PVC	4 ABS	7 Fiberglass		Threaded . . .
Blank casing dia 5 in. to 210 ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.				
Casing height above land surface 12 in., weight . . . lbs./ft. Wall thickness or gauge No. 18				
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC	10 Asbestos-cement	
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:		5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes	
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify) . . .	
Screen-Perforation Dia 5 in. to . . . ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.				
Screen-Perforated Intervals: From 210 ft. to 220 ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.				
Gravel Pack Intervals: From 20 ft. to 220 ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.				

5 GROUT MATERIAL:		1 Neat cement	2 Cement grout	3 Bentonite	4 Other . . .
Grouted Intervals: From 0 ft. to 20 ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.					
What is the nearest source of possible contamination:		10 Fuel storage	14 Abandoned water well		
1 Septic tank	4 Cess pool	7 Sewage lagoon	11 Fertilizer storage	15 Oil well/Gas well	
2 Sewer lines	5 Seepage pit	8 Feed yard	12 Insecticide storage	16 Other (specify below)	
3 Lateral lines	6 Pit privy	9 Livestock pens	13 Watertight sewer lines	none	
Direction from well . . . How many feet . . . ? Water Well Disinfected? Yes X No					
Was a chemical/bacteriological sample submitted to Department? Yes . . . No X If yes, date sample was submitted . . . month . . . day . . . year: Pump Installed? Yes . . . No X					
If Yes: Pump Manufacturer's name . . . Model No. . . HP . . . Volts . . .					
Depth of Pump Intake . . . ft. Pumps Capacity rated at . . . gal./min.					
Type of pump:	1 Submersible	2 Turbine	3 Jet	4 Centrifugal	5 Reciprocating
					6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 4 month 5 day 78 year					
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 214					
This Water Well Record was completed on 9 month 25 day 80 year under the business name of BLUE JAY DRILLING CO. INC. by (signature) <i>Marilyn Hall</i>					

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0)	135	top soil			
	135	155	fine sand gravel sandy clay			
	155	175	fine sand gravel			
	175	195	gravel sandy clay			
	195	215	gravel sandy clay			
	215	220	gravel			
220	222	ochre shale				

ELEVATION: upland
Depth(s) Groundwater Encountered 1. 112 ft. 2. ft. 3. ft. 4. ft.

(Use a second sheet if needed)

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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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EW

SEC.

19

SE 1/4

NW 1/4

NW 1/4

NW 1/4