

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Thomas</u>		<u>SE 1/4 NW 1/4 NW 1/4</u>	<u>31</u>	<u>T 7 S</u>	<u>R 33 E</u>
Distance and direction from nearest town or city? <u>1/2 N Colby</u>			Street address of well if located within city?		
2 WATER WELL OWNER: <u>Leon Rutten</u>			Board of Agriculture, Division of Water Resources		
RR#, St. Address, Box # City, State, ZIP Code: <u>Colby Kansas 67701</u>			Application Number:		
3 DEPTH OF COMPLETED WELL: <u>200</u> ft. Bore Hole Diameter: <u>5</u> in. to <u>200</u> ft. and _____ in. to _____ ft.					
Well Water to be used as:		5 Public water supply		8 Air conditioning	
<input checked="" type="radio"/> Domestic		3 Feedlot		11 Injection well	
2 Irrigation		4 Industrial		9 Dewatering	
7 Lawn and garden only		10 Observation well		12 Other (Specify below)	
Well's static water level: <u>77</u> ft. below land surface measured on _____ month _____ day <u>1980</u> year					
Pump Test Data		Well water was _____ ft. after _____ hours pumping _____ gpm		Est. Yield <u>Not tested</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm	
4 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		8 Concrete tile	
2 PVC		4 ABS		9 Other (specify below)	
Blank casing dia: <u>5</u> in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		5 Wrought iron		Casing Joints: <input checked="" type="checkbox"/> Glued <input checked="" type="checkbox"/> Clamped _____	
Casing height above land surface: <u>15</u> in., weight <u>19 1/2</u> lbs./ft. Wall thickness or gauge No. <u>1/4"</u>		6 Asbestos-Cement		Welded _____	
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 Fiberglass		Threaded _____	
1 Steel		3 Stainless steel		7 PVC	
2 Brass		4 Galvanized steel		8 RMP (SR)	
5 Fiberglass		6 Concrete tile		9 ABS	
Screen or Perforation Openings Are:		5 Gauzed wrapped		8 Saw cut	
1 Continuous slot		3 Mill slot		11 None (open hole)	
2 Louvered shutter		4 Key punched		9 Drilled holes	
3 Screen-Perforation Dia: <u>5</u> in. to <u>180-200</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		6 Wire wrapped		10 Other (specify) _____	
Screen-Perforated Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		7 Torch cut			
Gravel Pack Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
5 GROUT MATERIAL: <input checked="" type="radio"/> Neat cement					
Grouted Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		2 Cement grout		3 Bentonite	
What is the nearest source of possible contamination:		4 Other		10 Fuel storage	
1 Septic tank		7 Sewage lagoon		11 Fertilizer storage	
2 Sewer lines		8 Feed yard		12 Insecticide storage	
3 Lateral lines		9 Livestock pens		13 Watertight sewer lines	
Direction from well: <u>SE</u> How many feet: <u>120</u> ? Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		14 Abandoned water well		15 Oil well/Gas well	
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		16 Other (specify below)			
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 <input checked="" type="radio"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month _____ day <u>1980</u> year					
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>139</u>					
This Water Well Record was completed on _____ month _____ day <u>1980</u> year under the business name of <u>Barthele Drawing</u> by (signature) <u>Joyce Barthele</u>					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		LITHOLOGIC LOG		LITHOLOGIC LOG	
		FROM 0 TO 42	Top Soil	FROM	TO
		42 34	Sand & Clay Strips		
		34 64	Sandy Clay		
		64 143	Sand & Sand Rock Strips		
		143 166	Sand Rock		
		166 180	Sand & Sand Rock Strips		
		180 187	Sand Rock		
		187 196	Sand		
		196 200	OR Sand Shale		
ELEVATION: _____					
Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)					

OFFICE USE ONLY

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R

33

EW

SEC.

31

SE

1/4

NW

1/4

NW

1/4

NW

1/4