

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number																																																																																																	
County: <b>Thomas</b>		NE 1/4 SE 1/4 SW 1/4		31		T 7 S		R 33 EW																																																																																																	
Distance and direction from nearest town or city street address of well if located within city?																																																																																																									
2 WATER WELL OWNER: <b>Pyramid Oil</b>																																																																																																									
RR#, St. Address, Box # : _____																																																																																																									
City, State, ZIP Code : <b>Colby, Ks. 67701</b> MW# <b>5</b> Board of Agriculture, Division of Water Resources Application Number: _____																																																																																																									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <b>125</b> ft. ELEVATION: _____																																																																																																							
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL <b>101.15</b> 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 <b>8</b> in. to <b>125</b> 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 Monitoring well _____ Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No <b>X</b>																																																																																																							
		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 _____ Blank casing diameter <b>4</b> in. to <b>95</b> ft. Dia. _____ in. to _____ ft. Dia. _____ in. to _____ ft. Casing height above land surface <b>0</b> in. weight <b>2.071</b> lbs./ft. Wall thickness or gauge No. <b>237</b>																																																																																																							
		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 11 Other (specify) _____ 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-PERFORATED INTERVALS: From <b>95</b> ft. to <b>125</b> ft. From _____ ft. to _____ ft.																																																																																																									
GRAVEL PACK INTERVALS: From <b>90</b> ft. to <b>125</b> ft. From _____ ft. to _____ ft.																																																																																																									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____																																																																																																									
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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 <b>Removed Fuel Storage</b> Direction from well? _____ How many feet? _____																																																																																																									
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>.6</td> <td>Rocks</td> <td>110</td> <td>120</td> <td>Med. Sand, Tight</td> </tr> <tr> <td>.6</td> <td>6</td> <td>Loess</td> <td>120</td> <td>128</td> <td>Med. Sand, Loose</td> </tr> <tr> <td>6</td> <td>6.5</td> <td>Cement</td> <td>128</td> <td>130</td> <td>Sandy Clay w/Sand Strks.</td> </tr> <tr> <td>6.5</td> <td>20</td> <td>Loess</td> <td></td> <td></td> <td></td> </tr> <tr> <td>20</td> <td>32</td> <td>Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>32</td> <td>40</td> <td>Clay w/Caliche</td> <td></td> <td></td> <td></td> </tr> <tr> <td>40</td> <td>60</td> <td>Clay w/Caliche</td> <td></td> <td></td> <td></td> </tr> <tr> <td>60</td> <td>69</td> <td>Med. Sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>69</td> <td>71</td> <td>Caliche</td> <td></td> <td></td> <td></td> </tr> <tr> <td>71</td> <td>79.5</td> <td>Caliche w/Sandy Clay Strks. &amp; Some Sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>79.5</td> <td>88.5</td> <td>Med. Sand w/a few Clay Strks.</td> <td></td> <td></td> <td></td> </tr> <tr> <td>88.5</td> <td>95</td> <td>Caliche w/Clay Strks.</td> <td></td> <td></td> <td></td> </tr> <tr> <td>95</td> <td>104</td> <td>Med. Sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>104</td> <td>106</td> <td>Caliche</td> <td></td> <td></td> <td></td> </tr> <tr> <td>106</td> <td>110</td> <td>Med. Sand</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>										FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	.6	Rocks	110	120	Med. Sand, Tight	.6	6	Loess	120	128	Med. Sand, Loose	6	6.5	Cement	128	130	Sandy Clay w/Sand Strks.	6.5	20	Loess				20	32	Clay				32	40	Clay w/Caliche				40	60	Clay w/Caliche				60	69	Med. Sand				69	71	Caliche				71	79.5	Caliche w/Sandy Clay Strks. & Some Sand				79.5	88.5	Med. Sand w/a few Clay Strks.				88.5	95	Caliche w/Clay Strks.				95	104	Med. Sand				104	106	Caliche				106	110	Med. Sand			
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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/year) <b>7-8-94</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>554</b> This Water Well Record was completed on (mo/day/yr) <b>9-12-94</b> under the business name of <b>Woofter Pump &amp; Well, Inc.</b> by (signature) <i>Jay C. Woofter</i>																																																																																																									
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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.																																																																																																									