

1 LOCATION OF WATER WELL: County: Thomas	Fraction SE 1/4 SE 1/4 NE 1/4	Section Number 25	Township Number T 7 S	Range Number R 34 E/W
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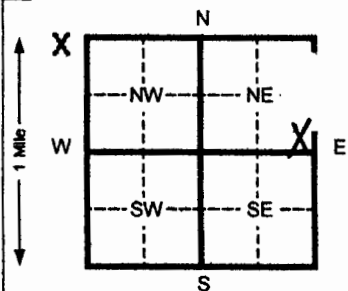
Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: **Eugene Robert**RR#, St. Address, Box # : **2710 W Range**City, State, ZIP Code : **Colby, Ks 67701**

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

200 ft. ELEVATION:Depth(s) Groundwater Encountered 1 **11.6** 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 **200** 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 well

Was a chemical/bacteriological sample submitted to Department? Yes _____ No **XX** If yes, mo/day/yr sample was submittedWater Well Disinfected? Yes **X** No

5 TYPE OF BLANK CASING USED:

1 Steel

3 RMP (SR)

5 Wrought Iron

8 Concrete tile

CASING JOINTS: Glued **X** Clamped

2 PVC

4 ABS

6 Asbestos-Cement

9 Other (specify below)

Welded

7 Fiberglass

Threaded

Blank casing diameter **4.5** in. to **160** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.Casing height above land surface **18** in., weight **2.38** lbs./ft. Wall thickness or gauge No. **.248**

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 **160** ft. to **200** ft. From _____ ft. to _____ ft.

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

GRAVEL PACK INTERVALS: From **20** ft. to **200** 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 **20** 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

16 Other (specify below)

13 Insecticide storage

none

Direction from well?

How many feet?

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2		Surface	170	185	Fine to some med sand w/clay lens
2	25		Loess	185	195	Fine sand w/clay
25	49		Clay w/caliche strk	195	200	Yellow ochre
49	54		Clay, caliche & gravel			
54	71		Fine to med sand & gravel			
71	87		Sandy clay			
87	93		Caliche			
93	102		Cemented sand w/sandy clay			
			Strk			
102	108		Sandy clay & caliche			
108	132		Fine to some med sand w/clay			
132	144		Sandstone			
144	165		Fine to some med sand			
165	170		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) **10-5-05** and this record is true to the best of my knowledge and belief. KansasWater Well Contractor's License No. **554**This Water Well Record was completed on (mo/day/yr) **10-7-05**

under the business name of

Woofer Pump & Well Inc.

by (signature)

[Signature]

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.