

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <b>Thomas</b>	<b>NW</b> $\frac{1}{4}$ <b>SE</b> $\frac{1}{4}$ <b>SE</b> $\frac{1}{4}$	<b>26</b>	<b>T</b> <b>7</b> <b>S</b>	<b>R</b> <b>34</b> <b>E</b> <b>N</b>

Distance and direction from nearest town or city street address of well if located within city?

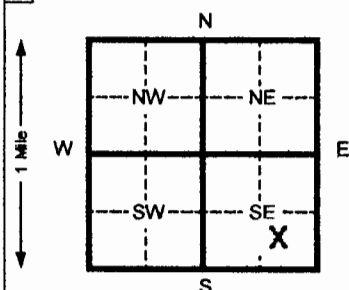
2 WATER WELL OWNER: **Troy Hockersmith**RR#, St. Address, Box #: **3445 Cottonwood**

Board of Agriculture, Division of Water Resources

City, State, ZIP Code: **Colby, KS 67701**

Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF COMPLETED WELL **190** ft. ELEVATION:

Depth(s) Groundwater Encountered 1 \_\_\_\_\_ 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 **190** 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 **X** If yes, mo/day/yr sample was submitted \_\_\_\_\_Water Well Disinfected? Yes \_\_\_\_\_ No **X**

5 TYPE OF BLANK CASING USED:

5 Wrought Iron

8 Concrete tile

CASING JOINTS: Glued **X** Clamped

① Steel

3 RMP (SR)

6 Asbestos-Cement

9 Other (specify below)

Welded

② PVC

4 ABS

7 Fiberglass

Threaded

Blank casing diameter **4.5** in. to **150** 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

9 ABS

11 Other (specify)

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 **150** ft. to **190** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From **40** ft. to **190** 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 **40** 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)

**None**

Direction from well?

How many feet?

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2		Surface	177	180	Clay
2	15		Loess	180	185	Fine to Some Med Sand w/ Clay & Caliche Lens
15	32		Clay			
32	41		Clay & Sandstone Str	185	185.5	Caliche
41	54		Clay & Caliche	185.5	188	Fine to Med Sand
54	66		Medium Sand	188	201	Yellow Ochre & Grey Shale
66	85		Sandstone	201	206	Black Shale
85	105		Clay w/ Sandstone Str			
105	116		Fine to Med Sand with Clay Len			
116	125		Sandstone			
125	133		Fine to Some Med Sand			
133	140		Sandy Clay w/ Fine Sand Str			
140	156		Fine to Med Sand			
156	177		Cementd Sand & Calche w/ Snd			

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) **5-20-06** 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) **6-20-06**

under the business name of

**Woofert Pump & Well Inc.**

by (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.