

Original Record		W W C-5		0102		sion of Wate			Wall ID	
1 LOCATION OF WA		e in Well U Fraction				irces App. Nion Numbe		Tourship Numb	Well ID	aga Numbar
	TIEK WELL:	1/4		/ <sub>4</sub> 1/ <sub>4</sub>	Secu	ion Numbe	r	Township Numb	er Rai	nge Number □ E □ W
County:	-4 N		/4 /		r Duro	1 Addross	who			
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:										
Address:	direction from nearest town of intersection). If at owner is address, effect from							check here.		
Address:										
City:	State:	ZIP:								
3 LOCATE WELL	4 DEPTH OF COV	IPLETEI	WELL:		ft	5 Latitu	ıde.			(decimal degrees)
WITH "X" IN	Donth(s) Croundwater Encountered:									
SECTION BOX:	Depth(s) Groundwater Encountered: 1)									
N	WELL'S STATIC WATER LEVEL: ft. Source for Latitude/Longitude:					VIID 21				
	<ul> <li>below land surface,</li> </ul>	measured	on (mo-day	y-yr)			PS (1	unit make/model:		)
NW NE	☐ above land surface,						(WAAS enabled? ☐ Yes ☐ No)			
	Pump test data: Well w				☐ Land Survey ☐ Topographic Map					
W X E	after hours					☐ Online Mapper:				
SW   SE	after hours									
	Estimated Yield:			gpm	6 Elevation:ft. ☐ Ground Level ☐ TOO				d Level 🔲 TOC	
S	Bore Hole Diameter:		to	ft. and						
1 mile			to					Other		
7 WELL WATER TO	BE USED AS:									
1. Domestic:	5. ☐ Public Wa	ter Supply:	well ID			10. □ Oi	l Fie	ld Water Supply: 16	ease	
☐ Household	6. Dewaterin	g: how ma	any wells?.					well ID		
☐ Lawn & Garden	7. 🗌 Aquifer Re							☐ Uncased ☐		
☐ Livestock	8. Monitoring							al: how many bores		
2.  Irrigation	9. Environmenta							Loop Horizont		
3. Feedlot	☐ Air Sparge		Soil Vapor	Extraction	traction b) Open Loop  Surface Discharge  Inj. of Water  13. Other (specify):					
4. Industrial	Recovery		Injection							
Was a chemical/bacteri		itted to K	KDHE? □	Yes 🔲	No	If yes, date	san	nple was submitte	:d:	
Water well disinfected?										
8 TYPE OF CASING										
Casing diameter										,
Casing height above land so			ht	lbs	s./ft.	Wall thick	ness	or gauge No		
TYPE OF SCREEN OR										
	less Steel		□ PVC	1.7	1 1 1		ier (S	Specify)	• • • • • • • • • • • • • • • • • • • •	
☐ Brass ☐ Galva SCREEN OR PERFORA	anized Steel		☐ None	used (oper	i noie)					
		auze Wrapj	ned □T	orch Cut		illed Holes	П	Other (Specify)		
	☐ Key Punched ☐ W					ne (Open H		Office (Specify)		•••••
SCREEN-PERFORATE								ft From	ft. to	ft.
										) ft.
GRAVEL PACK INTERVALS: From										
Grout Intervals: From										
Nearest source of possible contamination:										
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage										
☐ Sewer Lines	☐ Cess Pool		Sewage L			Fuel Storage			oned Water	
☐ Watertight Sewer Line			Feedyard		☐ F	Fertilizer Sto	rage	☐ Oil We	ell/Gas Well	
☐ Other (Specify)										
			ance from v							IC DITEDMALC
10 FROM TO	LITHOLOG	JIC LUG		FRO	M	TO	LII	HO. LOG (cont.) or	PLUGGIN	GINTERVALS
				Noto	7.					
Notes:										
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged										
under my jurisdiction an	d was completed on (m	no-dav-ve	ar)	14. 11119	and th	nis record i	s tru	ie to the best of m	v knowled	ge and belief.
Kansas Water Well Cont	ractor's License No		This W	ater Wel	Reco	ord was con	nple	ted on (mo-day-y	ear)	
under the business name of										
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well.  KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.										
KS Department of Health ar	a Environment, Bureau of V	vater, Geolo	gy Section, 1	LUUU SW Ja	ekson S	t., Suite 420,	1 ope	ka, Kansas 66612-136	)/. relephon	e 185-296-3565.

KSA 82a-1212 Visit us at http://www.kdheks.gov/waterwell/index.html

Form	WWC5		
Contractor	Woofter Pump and Well, Inc.		
Well Owner	Carl Woofter		
Doc ID	1258732		

## Litholgy

From	То	LithologicLog
0	2	surface
2	14	loess
14	17	caliche
17	35	clay w/caliche lenses
35	43	caliche w/sand strks
43	59	med sand * small gravel w/clay lenses
59	75	clay w/caliche strks
75	77	caliche
77	81	caliche w/sand
81	107	med sand
107	118	caliche
118	121	lay
121	127	ine to med sand
127	128	clay caliche sand strks
128	135	med sand
135	138	caliche
138	139	sand med
139	150	caliche clay strks
150	152	med sand
152	153	caliche
153	155	med sand
155	159	cemented sand
159	175	med sand & gravel

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## Litholgy

From	То	LithologicLog
175	177	ochre
177	200	black shale