

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <b>Thomas</b>		<b>SE 1/4 SE 1/4 SE 1/4</b>	<b>9</b>	<b>T 7 S</b>	<b>R 35 EW</b>
Distance and direction from nearest town or city street address of well if located within city? <b>5 Miles North, 1 Mile West of Levant, Kansas</b>					
2 WATER WELL OWNER: <b>Bob McConville</b>		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box #: <b>Rt. 3 Box 375</b>		Application Number:			
City, State, ZIP Code: <b>Colby, Kansas 67701</b>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <b>240</b> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.			
		WELL'S STATIC WATER LEVEL: <b>135</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>240</b> ft., and .... in. to .... ft.			
		WELL WATER TO BE USED AS:			
		1 Domestic    3 Feedlot    6 Oil field water supply    9 Dewatering    11 Injection well 2 Irrigation    4 Industrial    7 Lawn and garden only    10 Monitoring well    12 Other (Specify below)			
		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:		CASING JOINTS: Glued <b>X</b> Clamped			
1 Steel    3 RMP (SR)		Welded			
2 PVC    4 ABS		Threaded			
Blank casing diameter: <b>4.5</b> in. to <b>200</b> ft. Dia		in. to .... ft. Dia			
Casing height above land surface: <b>18</b> in., weight <b>2.38</b> lbs./ft. Wall thickness or gauge No. <b>248</b>					
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC    10 Asbestos-cement			
1 Steel    3 Stainless steel    5 Fiberglass    8 RMP (SR)    11 Other (specify) .....		12 None used (open hole)			
2 Brass    4 Galvanized steel    6 Concrete tile    9 ABS					
SCREEN OR PERFORATION OPENINGS ARE:		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>200</b> ft. to <b>240</b> ft., From .... ft. to .... ft.					
GRAVEL PACK INTERVALS: From <b>20</b> ft. to <b>240</b> ft., From .... ft. to .... ft.					
6 GROUT MATERIAL: 1 Neat cement    2 Cement grout    3 Bentonite    4 Other					
Grout Intervals: From <b>0</b> ft. to <b>20</b> ft., From .... ft. to .... ft., From .... ft. to .... ft.					
What is the nearest source of possible contamination: <b>NONE</b>		10 Livestock pens    14 Abandoned water well			
1 Septic tank    4 Lateral lines    7 Pit privy    11 Fuel storage    15 Oil well/Gas well		12 Fertilizer storage    16 Other (specify below)			
2 Sewer lines    5 Cess pool    8 Sewage lagoon    13 Insecticide storage					
3 Watertight sewer lines    6 Seepage pit    9 Feedyard					
Direction from well?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Surface	173	183	Med. Sand & Gravel w/Cemented Strks.
2	20	Loess			
20	62	Clay w/Cable	183	185	Hard Caliche
62	85	Med. Sand & Gravel w/Clay Strk	185	200	Cemented Sand w/Sand Strks. w/Some Clay
85	104	Med.Sand & Gravel			
104	115	Sandy Clay w/Sand Strks.	200	212	Cemented Sand, Caliche, Clay w/Fine Sand Strks.
115	120	Sandy Clay w/Caliche&Sand Str			
120	137	Cemented Sand w/Some Sand & Clay Strks.	212	215	Caliche & Cemented Sand
			215	220	Fine to Med. Sand w/a few Clay & Caliche Strks.
137	139	Fine Sand w/Cemented Strks.			
139	144	Clay, Caliche & Some Sand	220	235	Fine Sand
144	152	Fine to Med. Sand w/Clay Strk &Some Caliche	235	245	Sticky Clay
			245	247	Fine Sand
152	173	Sandy Clay Caliche & Some Med.Sand Strks.	247	250	Ochra
			250	260	Shale
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>12-14-94</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>12-15-94</b> under the business name of <b>Woofter Pump &amp; Well, Inc.</b> by (signature) <i>Gayle E. 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.					

OFFICE USE ONLY

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