

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <b>Thomas</b>		<b>SE 1/4 SE 1/4 NW 1/4</b>	<b>3</b>	<b>T 7 S</b>	<b>R 36 EW</b>
Distance and direction from nearest town or city street address of well if located within city? <b>8 miles north, 3 east, 1/4 mile so of Brewster</b>					
2 WATER WELL OWNER: <b>Lyman Goetsch</b>					
RR#, St. Address, Box # : <b>2470 Co. Rd 5</b>					
City, State, ZIP Code : <b>Brewster, Ks 67732</b>					
Page 1 of 2					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:					
		4 DEPTH OF COMPLETED WELL <b>225</b> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL <b>na</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>225</b> ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped
<input checked="" type="checkbox"/> 2 PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
			7 Fiberglass		Threaded _____
Blank casing diameter <b>4.5</b> in. to <b>185</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
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:					
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:					
1 Continuous slot		3 Mill slot	5 Gauzed wrapped	<input checked="" type="checkbox"/> 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 <b>185</b> ft. to <b>225</b> ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <b>20</b> ft. to <b>225</b> ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="checkbox"/> 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:					
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>Old well</b>
Direction from well? <b>NE</b> How many feet? <b>25</b>					
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
0	3		Surface	107	108
3	12		Loess	108	118
12	48		Clay	118	128
48	56		Med sand & gravel	128	130
56	64		Sandy clay & caliche		
64	66		Hard caliche & cemented sand	130	137
66	78		Caliche cemented sd & clay	137	140
78	80		Sandy clay & caliche	140	142
80	82		Hard caliche & cemented sand	142	151
82	91		Sandy clay & caliche w/some sd	151	153
91	96		Sandy clay	153	174
96	97		Hard caliche & cemented sand		
97	101		Sandy clay & caliche strks, hard	174	178
101	107		Sandy clay w/med sd strks	178	184
				PLUGGING INTERVALS	
				Hard caliche & cemented sand	
				Sandy clay caliche & some med sand	
				Sticky sandy clay w/some sand	
				Hard caliche cemented sd w/clay	
				Layers	
				Med sand w/clay & caliche strks	
				Hard caliche & cemented sand	
				Med sand	
				Hard caliche	
				Med sand	
				Hard caliche cemented sd w/some	
				Sand strks	
				Med sand w/ clay	
				Hard cal. Cemented sand & chirt	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was					
completed on (mo/day/yr) <b>6-15-04</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>6-18-04</b>					
under the business name of <b>Woofert Pump &amp; Well, Inc.</b> by (signature) <i>[Signature]</i>					
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send 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.					

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