

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Thomas</u>		<u>NE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$	<u>2</u>	<u>T</u> <u>8</u> <u>S</u>	<u>R</u> <u>34</u> <u>E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>$\frac{1}{2}$ W., $\frac{1}{2}$ S. of Colby</u>					
2 WATER WELL OWNER: <u>Bill Deaper</u>					
RR#, St. Address, Box # : <u>Rt. 1</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Colby, Kansas 67701</u>			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>261</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>143</u> ft. below land surface measured on mo/day/yr <u>10-8-85</u>			
		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 <u>9</u> in. to <u>261</u> ft., and in. to ft.			
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well			
		1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)			
		2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well			
		Was a chemical/bacteriological sample submitted to Department? Yes.....No.. <u>X</u>; If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes <u>X</u> No			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
2 PVC		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
				8 Concrete tile	
				9 Other (specify below)	
				CASING JOINTS: Glued <u>X</u> Clamped	
				Welded	
				Threaded	
Blank casing diameter <u>5</u> in. to <u>241</u> ft., Dia		in. to ft., Dia		in. to ft.	
Casing height above land surface <u>12</u> in., weight <u>2.87</u> lbs./ft.		Wall thickness or gauge No. <u>265</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				7 PVC	
				8 RMP (SR)	
				9 ABS	
				10 Asbestos-cement	
				11 Other (specify)	
				12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		3 Mill slot		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
				7 Torch cut	
				8 Saw cut	
				9 Drilled holes	
				10 Other (specify)	
				11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From <u>241</u> ft. to <u>261</u> ft., From ft. to ft.					
GRAVEL PACK INTERVALS: From <u>15</u> ft. to <u>261</u> 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 <u>5</u> ft. to <u>15</u> 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	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below)	
Direction from well? <u>West</u> How many feet? <u>300</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Surface	203	208	Clay
3	45	Clay	208	221	Med. Coarse Sand
45	55	Med. Sand	221	252	Clay
55	63	Clay & Caliche	252	261	Coarse Sand
63	85	Sandy Clay			
85	96	Clay			
96	103	Med. Sand			
103	116	Clay			
116	122	Med. Sand			
122	140	Clay			
140	162	Med.-Coarse Sand			
162	173	Clay			
173	188	Med. Sand			
188	195	Clay			
195	203	Med. Sand			
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/year) <u>10-8-85</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>394</u> This Water Well Record was completed on (mo/day/yr) <u>12-10-85</u> under the business name of <u>Woofter Pump & Well</u> by (signature) <u>Walt G. Galt</u>					
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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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E/W

SEC.

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