

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Thomas		NW 1/4 NW 1/4 NW 1/4	11	T 8 S	R 35 EW
Distance and direction from nearest town or city street address of well if located within city?					
2 WATER WELL OWNER: Brad Skolout					
RR#, St. Address, Box # : 1076 County Rd W			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Levant, Ks 67743			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 205 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.			
		WELL'S STATIC WATER LEVEL na 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 220 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 5 in. to 165 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface 18 in., weight 2.765 lbs./ft. Wall thickness or gauge No. 25.8					
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			
		10 Other (specify) _____			
SCREEN-PERFORATED INTERVALS:					
From 165 ft. to 205 ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
GRAVEL PACK INTERVALS:					
From 20 ft. to 205 ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ 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 20 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		none	
Direction from well?		How many feet?			
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
0	2		Surface		
2	28		Loess	155	173
28	63		Clay w/caliche strks	173	197
63	72		Fine to med sd w/clay & Caliche strks	197	220
72	91		Fine to med sd w/clay & Caliche lenses		
91	105		Caliche & clay w/sd strks		
105	110		Fine to med sd w/clay & caliche Lenses		
110	125		Clay & caliche w/sand strks		
125	145		Fine to med sd w/clay & caliche Lenses		
145	155		Fine to med sd w/clay & caliche		
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) 10-9-08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 783 This Water Well Record was completed on (mo/day/yr) 10-14-08 under the business name of Woofert Pump & Well Inc. 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, 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.					

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