

LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Thomas</u>	<u>NE 1/4 SE 1/4 SW 1/4</u>	<u>2</u>	T <u>8</u> S	R <u>35</u> EW

Distance and direction from nearest town or city street address of well if located within city?

IN CITY OF LEVANT

WATER WELL OWNER:	<u>Delbert Touselee</u>	Board of Agriculture, Division of Water Resources
Tr.#, St. Address, Box #:	<u>250 N. Range</u>	Application Number:
City, State, ZIP Code:	<u>Colby Kansas 67901</u>	

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	DEPTH OF COMPLETED WELL <u>X</u> <u>152</u> ft. ELEVATION:
	Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.
	WELL'S STATIC WATER LEVEL <u>X</u> <u>6</u> ft. below land surface measured on mo/day/yr <u>3-28-88</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 in. to ft., and in. to ft.
	WELL WATER TO BE USED AS:
	<input checked="" type="radio"/> 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.....; If yes, mo/day/yr sample was submitted
	Water Well Disinfected? Yes No <u>X</u>

TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued Clamped
<u>1</u> Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
2 PVC	4 ABS	7 Fiberglass	Welded
			Threaded

Blank casing diameter X 5 in. to ft., Dia in. to ft., Dia in. to ft.
Casing height above land surface X in., weight lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL:	7 PVC	10 Asbestos-cement
1 Steel	3 Stainless steel	5 Fiberglass
2 Brass	4 Galvanized steel	6 Concrete tile
		8 RMP (SR)
		9 ABS
		11 Other (specify)
		12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:	5 Gauzed wrapped	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 ft. to ft., From ft. to ft.
	From ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS:	From ft. to ft., From ft. to ft.
	From ft. to ft., From ft. to ft.

GROUT MATERIAL: <u>X</u>	1 Neat cement	2 Cement grout	3 Bentonite	4 Other
Grout Intervals:	From ft. to ft., From ft. to ft.			

What is the nearest source of possible contamination:	10 Livestock pens	14 Abandoned water well
1 Septic tank	4 Lateral lines	7 Pit privy
2 Sewer lines	<u>5</u> Cess pool	8 Sewage lagoon
3 Watertight sewer lines	6 Seepage pit	9 Feedyard
		11 Fuel storage
		12 Fertilizer storage
		13 Insecticide storage
		15 Oil well/Gas well
		16 Other (specify below)

Direction from well? NW How many feet? 25

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		<u>PLUGGING CRITERIA</u>			
<u>152'</u>	<u>142'</u>	<u>wash sand</u>			
<u>142'</u>	<u>11'</u>	<u>clays</u>			
<u>11'</u>	<u>4'</u>	<u>cement grout</u>			
<u>4'</u>	<u>0'</u>	<u>TOP SOIL</u>			

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or <u>(3)</u> plugged under my jurisdiction and was completed on (mo/day/year) <u>X</u> <u>3-28-88</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/yr) <u>X</u> <u>4-1-88</u> under the business name of by (signature) <u>X</u> <u>Delbert Touselee</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, Bureau of Water Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.