

1 LOCATION OF WATER WELL:		Fraction <u>NW 1/4 NE 1/4 NE 1/4</u>		Section Number <u>19</u>	Township Number <u>T 8 S</u>	Range Number <u>R 39 E</u>
County: <u>Sherman</u>						
Distance and direction from nearest town or city street address of well if located within city? <u>902 Main, Goodland, KS. 67735</u>						
2 WATER WELL OWNER: <u>Dave's Auto Repair</u>						
RR#, St. Address, Box # : <u>902 Main</u>						
City, State, ZIP Code : <u>Goodland, KS. 67735</u>						
Board of Agriculture, Division of Water Resources MW#5 Application Number:						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>205</u> ft. ELEVATION: <u>190.11</u> ft.				
		Depth(s) Groundwater Encountered <u>190.11</u> ft. 2. <u>190.11</u> ft. 3. <u>190.11</u> ft.				
		WELL'S STATIC WATER LEVEL <u>190.11</u> ft. below land surface measured on mo/day/yr				
		Pump test data: Well water was <u>190.11</u> ft. after <u>190.11</u> hours pumping <u>190.11</u> gpm				
		Est. Yield <u>190.11</u> gpm: Well water was <u>190.11</u> ft. after <u>190.11</u> hours pumping <u>190.11</u> gpm				
		Bore Hole Diameter <u>8</u> in. to <u>205</u> ft. and <u>205</u> in. to <u>205</u> ft.				
WELL WATER TO BE USED AS:						
1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 7 Lawn and garden only 10 Monitoring well						
Was a chemical/bacteriological sample submitted to Department? Yes <u>No</u> No <u>X</u> ; If yes, mo/day/yr sample was submitted						
Water Well Disinfected? Yes <u>No</u> No <u>X</u>						
5 TYPE OF BLANK CASING USED:						
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <u>No</u> Clamped <u>No</u> 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded <u>No</u> Threaded <u>X</u>						
Blank casing diameter <u>4</u> in. to <u>175</u> ft. Dia <u>175</u> in. to <u>175</u> ft. Dia <u>175</u> in. to <u>175</u> ft.						
Casing height above land surface <u>0</u> in., weight <u>2.071</u> lbs./ft. Wall thickness or gauge No. <u>237</u>						
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) <u>Contaminated Site</u> 12 None used (open hole)						
SCREEN OR PERFORATION OPENINGS ARE:						
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 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) <u>Contaminated Site</u>						
SCREEN-PERFORATED INTERVALS: From <u>175</u> ft. to <u>205</u> ft. From <u>175</u> ft. to <u>205</u> ft. From <u>175</u> ft. to <u>205</u> ft.						
GRAVEL PACK INTERVALS: From <u>170</u> ft. to <u>205</u> ft. From <u>170</u> ft. to <u>205</u> ft. From <u>170</u> ft. to <u>205</u> ft.						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Intervals: From <u>0</u> ft. to <u>166</u> ft. From <u>166</u> ft. to <u>170</u> ft. From <u>170</u> ft. to <u>170</u> 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) <u>Contaminated Site</u> 13 Insecticide storage						
Direction from well? <u>How many feet?</u>						
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
0	.6	Cement	169	182	Sandy Clay w/Med. Sand Strks.	
.6	20	Loess	182	205	Fine to Med. Sand w/Clay Layers	
20	43	Clay & Caliche				
43	44	Chirt				
44	54	Clay & Caliche w/Chirt Strks.				
54	75	Med. Sand & Gravel w/Clay Layers				
75	94	Med. Sand & Gravel w/Rocks & Clay				
94	99	Sandy Clay & Caliche				
99	123	Med. Sand & Gravel w/Clay Lyrs.				
123	127	Cem. Sand w/Clay & Sand Layers				
127	133	Med. Sand & Gravel				
133	138.5	Sandy Clay & Caliche w/S.Sand				
138.5	143	Med. Sand & Gravel w/a Few Clay Lyrs.				
143	155	Sandy Clay & Caliche w/Some Sand				
155	169	Med. Sand & Gravel w/a Few Clay Layers				
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) <u>9-16-97</u> and this record is true to the best of my knowledge and belief. Kansas						
Water Well Contractor's License No. <u>554</u> This Water Well Record was completed on (mo/day/yr) <u>9-26-97</u>						
under the business name of <u>Woofter Pump & Well, Inc.</u> by (signature) <u>Jay C. Woofter</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, 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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