

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Sherman</u>	<u>SE 1/4 NW 1/4 NE 1/4</u>	<u>8</u>	<u>T 8 S</u>	<u>R 39</u> <b>EW</b>

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

1 North 1 East of Goodland

2 WATER WELL OWNER: <u>Sherman County</u>	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # : <u>%Eng. Office West 8th</u>	Application Number:
City, State, ZIP Code : <u>Goodland, KS 67735</u>	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>207</u> ft. ELEVATION:
	Depth(s) Groundwater Encountered <u>1</u> ft. <u>2</u> ft. <u>3</u> ft. WELL'S STATIC WATER LEVEL <u>147</u> ft. below land surface measured on mo/day/yr <u>2-20-87</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>8</u> in. to <u>207</u> ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: <u>5</u> Public water supply <u>8</u> Air conditioning <u>11</u> Injection well <u>1</u> Domestic <u>3</u> Feedlot <u>6</u> Oil field water supply <u>9</u> Dewatering <u>12</u> Other (Specify below) <u>2</u> Irrigation <u>4</u> Industrial <u>7</u> Lawn and garden only <u>10</u> <u>Observation well</u> <u>Monitor Well</u> 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 _____ No <u>X</u>

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below) _____ Welded _____
2 PVC	4 ABS	7 Fiberglass	_____ Threaded <u>X</u>
Blank casing diameter <u>4</u> in. to <u>147</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.			
Casing height above land surface <u>24</u> in., weight <u>2.02</u> lbs./ft. Wall thickness or gauge No. <u>237</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:	<u>7</u> PVC	10 Asbestos-cement	
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
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 <u>147</u> ft. to <u>207</u> ft. From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From <u>22</u> ft. to <u>207</u> ft. From _____ ft. to _____ ft.			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other _____
Grout Intervals: From <u>0</u> ft. to <u>20</u> ft. From <u>20</u> ft. to <u>22</u> 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
	2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage
	3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage
				13 Insecticide storage
				14 Abandoned water well
				15 Oil well/Gas well
				16 Other (specify below)
				<u>Landfill</u>
Direction from well? <u>West</u>				How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Surface	199	201	Rock
3	53	Clay	201	206	Medium Sand
53	55	Caliche	206	210	Clay
55	59	Medium Sand			
59	103	Caliche			
103	108	Clay			
108	118	Caliche			
118	127	Medium Sand & Gravel			
127	131	Clay			
131	136	Medium Sand			
136	149	Clay			
149	163	Caliche			
163	166	Fine Sand			
166	167	Rock Layer			
167	199	Caliche			

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>5-13-87</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>5-14-87</u> under the business name of <u>Woofter Pump &amp; Well</u> by (signature) <u>Walter Woof</u>
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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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.