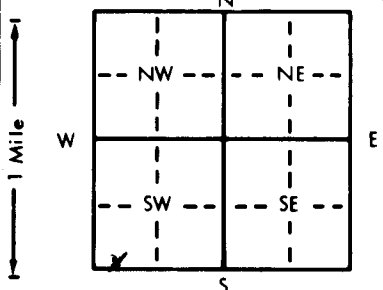


1 LOCATION OF WATER WELL: Fraction **TRACT IN THE SW 1/4 SW 1/4 SW 1/4** Section Number **19** Township Number **T 8 S** Range Number **R 39 SW**  
 County: **Sherman**

Distance and direction from nearest town or city street address of well if located within city?  
**TRACT IN THE SW 1/4 of Hoodland KANS.**

2 WATER WELL OWNER: **Foust Supply Co Inc**  
 RR#, St. Address, Box #: **Box 338 Hwy 24** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: **Goodland, Kansas 67735** Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: **221** ft. ELEVATION: \_\_\_\_\_  
 Depth(s) Groundwater Encountered 1. **182** ft. 2. \_\_\_\_\_ ft. 3. \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL: **182** ft. below land surface measured on mo/day/yr **8/4/83**  
 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:  
 1 ~~Domestic~~ 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Observation well 11 Injection well 12 Other (Specify below)  
 Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No ; If yes, mo/day/yr sample was submitted \_\_\_\_\_  
 Water Well Disinfected? Yes  No \_\_\_\_\_

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

Blank casing diameter **6** in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface **7 Ft. Below** weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No. \_\_\_\_\_

TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 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 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 11 None (open hole) 10 Other (specify) \_\_\_\_\_

SCREEN-PERFORATED INTERVALS: 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.

6 GROUT MATERIAL: 1 Neat cement 2 ~~Cement grout~~ 3 Bentonite 4 Other \_\_\_\_\_  
 Grout Intervals: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:  
 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 ~~Cesspool~~ 6 Seepage pit 7 Pit privy 8 Sewage lagoon 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? **South East** How many feet? **160 FT**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
221	156	Gravel Sand (4.45 Cubic Feet)			
156	20	Clays (3.54 Cubic Feet)			
20	7	Cement Grout (1.50 Cubic feet)			

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) **8/9/83** 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) **8/24/83**

under the business name of **Elfan Supply** by (signature) **Ralph Elfan Pres.**

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  
T  
H  
39  
FWD  
SEC.  
19  
SW 1/4  
SW 1/4  
SW 1/4