
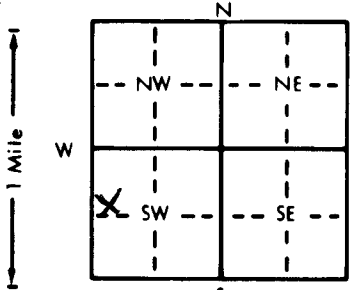


1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <u>Sherman</u>		<u>SW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$		<u>20</u>		<u>T 8</u> <u>S</u>		<u>R 39</u> 	
Distance and direction from nearest town or city street address of well if located within city?									
<u>Corner Gas Station Goodland, Ks. MW-4</u>									
2 WATER WELL OWNER: <u>Bill Bishop</u>									
RR#, St. Address, Box #: <u>P.O. Box 577</u>									
City, State, ZIP Code: <u>Goodland, Ks. 67735</u>									
Board of Agriculture, Division of Water Resources									
Application Number:									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:				4 DEPTH OF COMPLETED WELL <u>208</u> ft. ELEVATION:					
				Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.					
				WELL'S STATIC WATER LEVEL <u>188.61</u> ft. below land surface measured on mo/day/yr <u>3-21-91</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>208</u> ft., and in. to ft.					
				WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well					
				1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)					
				2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well					
				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:									
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped									
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded									
7 Fiberglass Threaded									
Blank casing diameter <u>.4</u> in. to <u>17.8</u> ft., Dia. in. to ft., Dia. in. to ft.									
Casing height above land surface in., weight lbs./ft. Wall thickness or gauge No.									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement									
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify)									
9 ABS 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)									
SCREEN-PERFORATED INTERVALS: From <u>208</u> ft. to <u>178</u> ft., From ft. to ft.									
From ft. to ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From <u>208</u> ft. to <u>174</u> ft., From ft. to ft.									
From ft. to ft., From ft. to ft.									
6 GROUT MATERIAL: 1 Neat cement 2 <u>Cement grout</u> 3 Bentonite 4 Other									
Grout Intervals: From <u>174</u> ft. to <u>149</u> ft., From <u>149</u> ft. to <u>TOP</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 14 Abandoned water well									
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 <u>Fuel storage</u> 15 Oil well/Gas well									
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)									
13 Insecticide storage									
Direction from well? <u>NW</u> How many feet? <u>50</u>									
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
0 3 Surface (top 2' asphalt) 124 141 Med. sand									
3 40 Silt 141 158 Clay & caliche									
40 41 Caliche 158 163 Med. sand /caliche& sandy									
41 48 Clay clay									
48 51 Caliche with small sand stone 163 173 Med. sand									
51 58 Clay 173 178 Clay									
58 72 Med. sand with caliche strks 178 210 Med. sand / caliche streak									
72 73 Caliche									
73 78 Clay with couple s. caliche strks.									
78 94 Med. sand (loose)									
94 96 Clay & caliche									
96 98 Clay									
98 105 Clay & caliche									
105 115 Sand									
115 124 Clay									
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/year) <u>3-19-91</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>3-26-91</u>									
under the business name of <u>WOOFER PUMP & WELL</u> by (signature) <u>Walter Wofter</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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									