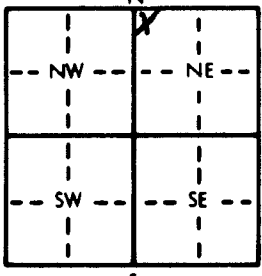


1 LOCATION OF WATER WELL: County: **Sheridan** Fraction: **NW 1/4 NW 1/4 NE 1/4** Section Number: **19** Township Number: **T 9 S** Range Number: **R 26 EW**

Distance and direction from nearest town or city street address of well if located within city?  
**6 S 10 E of Hoxie, Ks.**

2 WATER WELL OWNER: **Bill Minium**  
 RR#, St. Address, Box #: **Studley, Ks.** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: **Studley, Ks.** Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
  
 4 DEPTH OF COMPLETED WELL: **163** ft. ELEVATION:  
 Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL **112** ft. below land surface measured on **mo/day/yr 7-29-81**  
 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 **9** in. to **163** 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 Observation well  
 Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted  
 Water Well Disinfected? Yes **X** No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued **X** Clamped  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded  
 2 PVC 4 ABS 7 Fiberglass **Styrene** Threaded  
 Blank casing diameter ..... in. to **163** ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface **12** in., weight **1.75** lbs./ft. Wall thickness or gauge No. **.214**  
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement  
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) **Styrene**  
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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 **143** ft. to **163** ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From **15** ft. to **163** ft., 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 **5** ft. to **15** ft., From ..... ft. to ..... 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 Fuel storage 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? **East** How many feet? **350**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Surface	116	119	Cemented Sand & Med. Sand
3	27	Fine Sand	119	120	Thin Clay Layer
27	42	Fine Sand	120	126	Medium Sand
42	49	Clay	126	131	Caliche
49	59	Medium Sand	131	141	Clay
59	66	Clay	141	160	Med. Sand
66	69	Caliche	160	161	Clay
69	72	Clay	161	162	Clay
72	74	Sand	162	164	Med. Sand
74	76	Clay	164	166	Clay
76	79	Fine Sand	166	167	Caliche
79	109	Sandy Clay	167	204	Clay
109	112	Fine Sand	204	206	Fine Sand
112	113	Caliche	206	220	Ochre
113	116	Medium Sand			

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) **7-29-81** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **394A** This Water Well Record was completed on (mo/day/yr) **9-5-81** under the business name of **F & W Drilling** by (signature) *Walt Wolf*

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 9 R 26 EW SEC 19 NW 1/4 NE 1/4