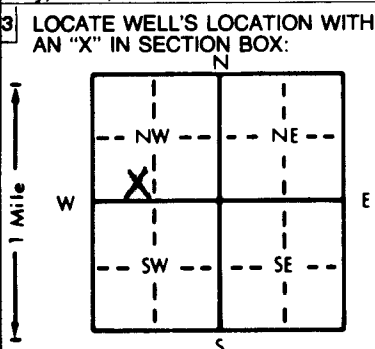


1 LOCATION OF WATER WELL: Fraction SE 1/4 SW 1/4 NW 1/4 Section Number 10 Township Number T 9 S Range Number R 28 EW
 County: Sheridan

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

2 WATER WELL OWNER: Sheridan County Landfill
 RR#, St. Address, Box # : _____ Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Hoxie, Ks. 67740 #3 Application Number: _____



4 DEPTH OF COMPLETED WELL: 105 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 69.01 ft. below land surface measured on mo/day/yr _____
 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 105 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 X _____; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes _____ No X _____

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 _____
 Blank casing diameter 2 in. to 7.5 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface _____ in., weight 7.16 lbs./ft. Wall thickness or gauge No. 154
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____
 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 75 ft. to 105 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 62 ft. to 105 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 0 ft. to 62 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) Landfill
 13 Insecticide storage
 Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Surface	101	104	Caliche w/Sand Strks.
1	15	Fine Sand & Clay	104	105	Sand & Gravel
15	17	Caliche w/Sandy Clay			
17	20	Sandy Clay, Caliche & Sand Strks.			
20	26	Fine Sand			
26	28	Caliche, Hard			
28	45	Sandy Clay w/Caliche & Sand Strks.			
45	55	Sand w/Clay Strks.			
55	63	Calichew/Sand & Clay Strks.			
63	72	Clay			
72	75	Fine Sand			
75	81	Clay & Caliche Mix			
81	84	Fine Sand			
84	86	Clay			
86	101	Med. Sand & Gravel w/Clay Strks.			

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) 9-1-93 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/yr) 9-2-93 under the business name of Woofter Pump & Well, Inc. by (signature) Gary C. Woofter

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.

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