

**1 LOCATION OF WATER WELL**  
 County: Sheridan Fraction: SE 1/4 SE 1/4 NW 1/4 Section Number: 16 Township Number: T 9 S Range Number: R 29 EW  
 Distance and direction from nearest town or city? 4 1/2 South and 2 East of Seguin Street address of well if located within city? N/A

**2 WATER WELL OWNER:** Lawrence Thummel  
 RR#, St. Address, Box #: Rt. 2 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Hoxie, Kansas Application Number: 34527

**3 DEPTH OF COMPLETED WELL:** 151 ft. Bore Hole Diameter: 30 in. to 151 ft., and      in. to      ft.  
 Well Water to be used as:  
 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  
 Well's static water level: 63 ft. below land surface measured on 2 month 19 day 81 year  
 Pump Test Data: Well water was      ft. after      hours pumping.      gpm  
 Est. Yield: 627 gpm: Well water was 113 ft. after 4 hours pumping. 627 gpm

**4 TYPE OF BLANK CASING USED:**  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded  
 2 PVC 4 ABS 7 Fiberglass Threaded  
 Blank casing dia: 16 in. to 65 ft., Dia in. to      ft., Dia in. to      ft.  
 Casing height above land surface: 12 in., weight      lbs./ft. Wall thickness or gauge No. 188  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 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:  
 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-Perforation Dia:      in. to      ft., Dia in. to      ft., Dia in. to      ft.  
 Screen-Perforated Intervals: From W.A. Brown 65 ft. to 92 ft., From      ft. to      ft.  
 From Johnson 92 ft. to 122 ft., From      ft. to      ft.  
 Gravel Pack Intervals: From W.A. Brown 122 ft. to 142 ft., From Johnson 142 ft. to 151 ft.  
 From      ft. to      ft., From      ft. to      ft.

**5 GROUT MATERIAL:** 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Cement  
 Grouted Intervals: From 0 ft. to 10 ft., From      ft. to      ft., From      ft. to      ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well  
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well  
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)  
 13 Watertight sewer lines  
 Direction from well: West How many feet: 2600 ? Water Well Disinfected? Yes      No X  
 Was a chemical/bacteriological sample submitted to Department? Yes      No X If yes, date sample was submitted      month      day      year: Pump Installed? Yes      No X  
 If Yes: Pump Manufacturer's name      Model No.      HP      Volts       
 Depth of Pump Intake      ft. Pumps Capacity rated at      gal./min.  
 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

**6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 2 month 18 day 81 year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 245  
 This Water Well Record was completed on 5 month 13 day 81 year under the business name of Western Well and Pump, Inc. by (signature) Roy F. Demian

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	20	Clay			
20	40	Coarse Gr. Med. to Fine Sand			
40	55	Med. to Coarse Gr.			
55	76	Fine Sand, Med. & Coarse Gr.			
76	84	Fine Sand to Med. Gr.			
84	96	Fine sand			
96	97	Sandstone (hard)			
97	124	Fine Sand to Med. Gr.			
124	138	Fine sand to Med. Gr. W/some coarse gravel			
138	147	Med. Gravel			
ELEVATION:	147	Ochre and Shale			

Depth(s) Groundwater Encountered 1. 70 ft. 2.      ft. 3.      ft. 4.      ft. (Use a second sheet if needed)

**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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY  
 T 19  
 R 9  
 SEC 16  
 SE 1/4  
 SE 1/4  
 NW 1/4