

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Thomas		NE ¼ NW ¼ NW ¼		3		T 9 S		R 32 E N	
Distance and direction from nearest town or city street address of well if located within city?									
2 WATER WELL OWNER: Lonnie Wilson									
RR#, St. Address, Box #: 2816 Cty Rd M					Board of Agriculture, Division of Water Resources				
City, State, ZIP Code: Colby, Ks 67701					Application Number:				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL 155 ft. ELEVATION: _____						
			Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.						
			WELL'S STATIC WATER LEVEL na 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 8 in. to 175 ft. and _____ in. to _____ ft.						
WELL WATER TO BE USED AS:			5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 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 X No _____									
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____									
Blank casing diameter 8 in. to 115 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Casing height above land surface 18 in., weight 2.38 lbs./ft. Wall thickness or gauge No. 248									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____ 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 115 ft. to 155 ft. From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From 20 ft. to 155 ft. From _____ ft. to _____ ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____									
Grout Intervals From 0 ft. to 20 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 none									
Direction from well? _____ How many feet? _____									
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS			
0	2		Surface	94	100	Fine to med sd sd w/clay & caliche			
2	16		Loess			Strks, fairly loose			
16	20		Clay	100	120	Fine to med sd w/clay & caliche strks,			
						Fairly loose			
20	29		Clay	120	136	Fine to med sd w/clay lenses			
29	40		Clay & caliche w/sand strks	136	140	Clay & caliche w/fine sd strks			
40	44		Clay & caliche w/sand strksk	140	154	Clay & caliche w/fine sd strks			
44	52		Clay	154	160	Yellow ochre			
52	60		Fine to med sd w/clay strks	160	175	Yellow ochre			
60	62		Fine to med sd w/clay strks						
62	70		Clay w/sand strks						
70	77		Fine to med sd						
77	80		Clay & caliche w/sand strks						
80	94		Clay & caliche w/sd 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/yr) 5-11-06 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) 5-26-06					
under the business name of Woofter Pump & Well Inc.				by (signature) <i>Wayle Woofter</i>					
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1387. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									

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