

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <b>Thomas</b>	<b>S 1/2 SW 1/4 SW 1/4</b>	<b>2</b>	<b>T 9 S</b>	<b>R 32</b>

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

2 WATER WELL OWNER: **Byron Sowers**RR#, St. Address, Box # : **2925 County Rd L**

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

**180** ft. ELEVATION:

Depth(s) Groundwater Encountered 1 \_\_\_\_\_ ft. 2 \_\_\_\_\_ ft. 3 \_\_\_\_\_ ft.

WELL'S STATIC WATER LEVEL **96** 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 **180** 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 ☒ If yes, mo/day/yr sample was submittedWater Well Disinfected? Yes ☒ No

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 **4.5** in. to **140** 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

☒ 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

2 Louvered shutter 4 Key punched

5 Gauzed wrapped

☒ 8 Saw cut

11 None (open hole)

6 Wire wrapped

9 Drilled holes

7 Torch cut

10 Other (specify)

SCREEN-PERFORATED INTERVALS: From **140** ft. to **180** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From **20** ft. to **180** 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 **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	141	145	Fine sand
2	24		Loess	145	150	Sandy clay & caliche w/fine sd strks
24	65		Clay & caliche	150	155	Caliche
65	70		Fine to med sd w/lots of clay	155	161	Fine sd w/sandstone sandy clay strks
70	74		Fine sand	161	166	Fine to some med sd w/clay strks
74	82		Clay w/caliche strks	166	173	Yellow ochre
82	87		Sandstone	173	180	Black shale
87	106		Sandy clay & caliche			
106	108		Caliche			
108	115		Clay			
115	128		Fine to some med sd w/sandy			
			Clay lenses			
128	139		Fine to med sand & small gravel			
139	141		caliche			

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) **5-29-06** 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) **6-9-06**

under the business name of

**Woofor Pump & Well Inc.**

by (signature)

*Jay L. Woofor*

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1387. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.