

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number				
County: <u>THOMAS</u>		<u>NW 1/4 NW 1/4 NW 1/4</u>	<u>36</u>	T <u>9</u> S	R <u>32</u> E <u>W</u>				
Distance and direction from nearest town or city street address of well if located within city? <u>8 N 1 E of Oakley, KS</u>									
2 WATER WELL OWNER: <u>David + Denise Nye</u>		Board of Agriculture, Division of Water Resources Application Number:							
RR#, St. Address, Box # : City, State, ZIP Code :									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>205</u> ft. ELEVATION: .....							
<div style="text-align: center;">N W      E S</div> <table border="1" style="margin: auto; width: 150px; height: 150px;"><tr><td style="text-align: center;">NW</td><td style="text-align: center;">NE</td></tr><tr><td style="text-align: center;">SW</td><td style="text-align: center;">SE</td></tr></table>		NW	NE	SW	SE	Depth(s) Groundwater Encountered 1 <u>150</u> ft. 2 ..... ft. 3 ..... ft.			
		NW	NE						
		SW	SE						
		WELL'S STATIC WATER LEVEL <u>150</u> 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							
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well							
		1 Domestic 3 Feedlot <u>6</u> Oil field water supply 9 Dewatering 12 Other (Specify below)							
		2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well .....							
		Was a chemical/bacteriological sample submitted to Department? Yes ..... No .....; If yes, mo/day/yrs sample was submitted Water Well Disinfected? Yes ..... No							
5 TYPE OF BLANK CASING USED:		5 Wrought iron		8 Concrete tile					
1 Steel		6 Asbestos-Cement		9 Other (specify below)					
2 PVC		7 Fiberglass		CASING JOINTS: Glued ..... Clamped .....					
3 RMP (SR)				Welded .....					
4 ABS				Threaded .....					
Blank casing diameter ..... in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.									
Casing height above land surface ..... in., weight ..... lbs./ft. Wall thickness or guage No. ....									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel		5 Fiberglass		7 PVC					
2 Brass		6 Concrete tile		8 RMP (SR)					
3 Stainless Steel				9 ABS					
4 Galvanized Steel				10 Asbestos-Cement					
				11 Other (Specify) .....					
				12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:									
1 Continuous slot		5 Guazed wrapped		8 Saw cut					
2 Louvered shutter		6 Wire wrapped		9 Drilled holes					
3 Mill slot		7 Torch cut		10 Other (specify) .....					
4 Key punched				11 None (open hole)					
SCREEN-PERFORATED INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft.									
GRAVEL PACK INTERVALS: From ..... ft. to ..... 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 ..... ft. to ..... 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					
2 Sewer lines		5 Cess pool		8 Sewage lagoon					
3 Watertight sewer lines		6 Seepage pit		9 Feedyard					
				10 Livestock pens					
				11 Fuel storage					
				12 Fertilizer storage					
				13 Insecticide storage					
				14 Abandoned water well					
				15 Oil well/Gas well					
				16 Other (specify below)					
Direction from well? ..... How many feet? .....									
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS				
			<u>205</u>	<u>150</u>	<u>Chlorinated Sand</u>				
			<u>150</u>	<u>20</u>	<u>Clay</u>				
			<u>20</u>	<u>5</u>	<u>Bentonite</u>				
			<u>5</u>	<u>0</u>	<u>Natural earth material</u>				
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) <u>2-15-12</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No <u>376</u> This Water Well Record was completed on (mo/day/yr) <u>4-4-12</u> under the business name of <u>B+B Drilling LLC</u> by (signature) <u>Joseph Beckman</u>									
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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.									