

|                            |                      |                |                 |              |
|----------------------------|----------------------|----------------|-----------------|--------------|
| 1. LOCATION OF WATER WELL: | Fraction             | Section Number | Township Number | Range Number |
| County: Thomas             | SE 1/4 SE 1/4 SE 1/4 | 4              | T 9 S           | R 33 E/W     |

14 south 3 east of Colby

City, State, ZIP Code : Oakley, Ks 67748

Application Number:

4 DEPTH OF COMPLETED WELL. . . 250 . . . . . ft. ELEVATION: . . . . .

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

WELL'S STATIC WATER LEVEL ..... 187.. ft. below land surface measured on mo/day/yr 5-14-91.....

Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm.

Est. Yield . . . . . gpm: Well water was not tested after . . . . . hours pumping . . . . . gpm

Bore Hole Diameter . . . . 8 . . . in. to . . . 250 . . . . . 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 sub

mitted Water Well Disinfected? Yes ☒ No

CASING JOINTS: Glued . . . x . . . Clamped . . . . .

Welded . . . . .

Threaded. . . . .

Blank casing diameter . . . . . 5 . . . in. to . . . 230 . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.

Casing height above land surface.....18 in., weight.....1 8/10.....lbs./ft. Wall thickness or gauge No. 1/4".....

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-PERFORATED INTERVALS: From 230 ft. to 250 ft., From . . . . . ft. to . . . . . ft.

GRAVEL PACK INTERVALS: From 18 ft. to 250 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 4 ft. to 18 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 | 11 Fuel storage | 15 Oil well/Gas well |
|---------------|-----------------|-------------|-----------------|----------------------|

2 Sewer lines      5 Cess pool      8 Sewage lagoon      12 Fertilizer storage      16 Other (specify below)

3 Watertight sewer lines    6 Seepage pit    9 Feedyard    13 Insecticide storage    In pasture.....

Direction from well?

How many feet?

[illegible]

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) 5-14-91 and this record is true to the best of my knowledge and belief. Kansa

Water Well Contractor's License No. 139 This Water Well Record was completed on (mo/day/yr) 7-13-91  
under the business name of Bartell Drilling by (signature) Dave Bartell

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.