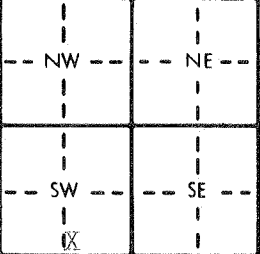


LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Thomas</u>	<u>SW</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	<u>30</u>	<u>T</u> <u>9</u> ; <u>S</u>	<u>R</u> <u>34</u> <u>EW</u>

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

4 miles West, 10 South, 1 West, &  $\frac{1}{2}$  South of Colby, Kansas

WATER WELL OWNER:	<u>Robert Ulrich</u>	Board of Agriculture, Division of Water Resources Application Number <u>T85-117</u>
IR#, St. Address, Box # :	<u>Rt 2</u>	
City, State, ZIP Code :	<u>Colby, Kansas 67701</u>	

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>180</u> ft. ELEVATION: .....
	Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.
	WELL'S STATIC WATER LEVEL ..... <u>137</u> ft. below land surface measured on mo/day/yr <u>1/13/85</u>
	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 ..... <u>9</u> in. to ..... <u>180</u> 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 Observation well
	Was a chemical/bacteriological sample submitted to Department? Yes.....No. <u>X</u> .....; If yes, mo/day/yr sample was submitted
	Water Well Disinfected? Yes ..... No <u>X</u>

TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> .... Clamped .....
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below) Welded .....
2 PVC	4 ABS	7 Fiberglass	Threaded .....
Blank casing diameter ..... <u>5</u> in. to ..... <u>160</u> ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.			
Casing height above land surface ..... <u>12</u> in., weight ..... lbs./ft. Wall thickness or gauge No. ....			

TYPE OF SCREEN OR PERFORATION MATERIAL:	7 PVC	10 Asbestos-cement		
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:	5 Gauzed wrapped	8 Saw cut	11 None (open hole)	
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 ..... <u>160</u> ft. to ..... <u>180</u> ft., From ..... ft. to ..... ft.
	From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS:	From ..... <u>10</u> ft. to ..... <u>180</u> ft., From ..... ft. to ..... ft.
	From ..... ft. to ..... ft., From ..... ft. to ..... ft.

ROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other .....
Grout Intervals: From ..... <u>0</u> ft. to ..... <u>10</u> ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.				

What is the nearest source of possible contamination:	10 Livestock pens	14 Abandoned water well		
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	Plugged Oil Well .....

Direction from well? Southeast How many feet? 250'

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Surface	137	138	Clay
3	44	Clay	138	140	Med Sand
44	58	Caliche & Clay	140	147	Caliche
58	66	Fine Med Sand	147	149	Fine Sand
66	76	Clay	149	152	Clay
76	94	Med Sand	152	164	Fine Sand
94	101	Caliche	164	167	Clay
101	109	Clay	167	174	Sandy Clay
109	115	Caliche	174	178	Med Sand
115	122	Med Sand	178	180	Ochre
122	123	Clay			
123	130	Caliche			
130	133	Med Sand			
133	135	Clay			
135	137	Fine Sand			

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) ..... 1/13/85 ..... and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. .... 394 ..... This Water Well Record was completed on (mo/day/yr) 3/8/85 .....Under the business name of Woofert Pump & Well by (signature) Walter W. Woffert

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, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.