

LOCATION OF WATER WELL: Fraction SE 1/4 NE 1/4 NW 1/4 Section Number 32 Township Number T 22 S Range Number R 12 E
 County: STAFFORD
 Distance and direction from nearest town or city street address of well if located within city?
1/4 M S of Hudson

WATER WELL OWNER: City of Hudson
 RR#, St. Address, Box #: Hudson, KS
 City, State, ZIP Code: Hudson, KS
 Board of Agriculture, Division of Water Resources
 Application Number: 786-347

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N			
	NW	NE	
W			E
	SW	SE	
	S		

DEPTH OF COMPLETED WELL 80 ft. ELEVATION: _____ ft.
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 12 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 _____ ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) TEMP. to fill pits
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes NO

TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Sealed Clamped _____
PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing diameter 8-60 in. to 60 ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.
 Casing height above land surface 12 in., weight _____ lbs./ft. Wall thickness or gauge No. _____

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 60 ft. to 80 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 10 ft. to 80 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From 10 ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination: NONE
 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 _____

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Top Soil			
3	55	Clay			
55	80	gravel			

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) Oct. 24, 1986 and this record is true to the best of my knowledge and belief. Kansas
 Water Well Contractor's License No. 4163 This Water Well Record was completed on (mo/day/yr) Nov. 15, 1986
 Under the business name of Sam's Water Well Service by (signature) Sam Rayburn

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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

T

R

EW

SEC.

1/4

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