

LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Stagwell</u>		<u>C ¼ NW ¼</u>	<u>18</u>	<u>T 22 S</u>	<u>R 13 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1W 250g Seward, KS</u>					
WATER WELL OWNER: <u>NORMAN SPAUGENBERG</u>					
IR#, St. Address, Box # :		Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : <u>Hudson, KS</u>		Application Number:			
LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		DEPTH OF COMPLETED WELL.....70..... ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1.....ft. 2.....ft. 3.....ft.			
		WELL'S STATIC WATER LEVEL17..... ft. below land surface measured on mo/day/yr			
		Pump test data: Well water wasft. after hours pumping gpm			
		Est. Yield gpm: Well water wasft. after hours pumping gpm			
		Bore Hole Diameter.....8.....in. toft., and.....in. toft.			
		WELL WATER TO BE USED AS: ☒ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Air conditioning ☐ Injection well ☐ Irrigation ☐ Industrial ☐ Lawn and garden only ☐ Dewatering ☐ Other (Specify below)			
		Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted			
TYPE OF BLANK CASING USED:		CASING JOINTS: ☒ Glued ☐ Clamped			
1 Steel 3 RMP (SR)		8 Concrete tile Welded.....			
☒ PVC 4 ABS		9 Other (specify below) Threaded.....			
Blank casing diameter3.....in. toft., Dia.....in. toft., Dia.....in. toft.					
Casing height above land surface12.....in., weight.....lbs./ft. Wall thickness or gauge No.					
TYPE OF SCREEN OR PERFORATION MATERIAL:		☒ 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 ☒ Mill slot 6 Wire wrapped 9 Drilled holes					
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)					
SCREEN-PERFORATED INTERVALS: From.....60.....ft. to.....70.....ft., From.....ft. to.....ft.					
GRAVEL PACK INTERVALS: From.....13.....ft. to.....70.....ft., From.....ft. to.....ft.					
GROUT MATERIAL: ☒ Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout intervals: From.....3.....ft. to.....13.....ft., From.....ft. to.....ft., From.....ft. to.....ft.					
What is the nearest source of possible contamination: NONE		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					
Direction from well?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Top Soil			
3	48	Clay			
48	70	gravel			
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) <u>6-30-86</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>462</u> This Water Well Record was completed on (mo/day/yr) <u>6-1-86</u> under the business name of <u>Sams Water Well Service</u> by (signature) <u>Sam Rayburn</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, 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.					