

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Ford</u>		<u>NE 1/4</u> <u>SE 1/4</u> <u>NE 1/4</u>	<u>22</u>	T <u>26</u> S	R <u>26</u> E <u>(W)</u>
Distance and direction from nearest town or city street address of well if located within city? <u>2 miles east of Howell, KS. on north side of Hwy. 50</u>					
2 WATER WELL OWNER: <u>Fred Hessman</u>					
RR#, St. Address, Box #: <u>Rt. 2</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code: <u>Dodge City, KS 67801</u>			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>60</u> ft. ELEVATION:			
<div><div>1 Mile</div><div><div>N</div><div>W</div><div>E</div><div>S</div></div><div><div>NW</div><div>NE</div><div>SW</div><div>SE</div></div><div>X</div></div>		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL <u>24</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 Bore Hole Diameter <u>9 7/8</u> in. to <u>60</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 Monitoring 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 _____			
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR)		5 Wrought iron 8 Concrete tile		CASING JOINTS: Glued _____ Clamped _____	
② PVC 4 ABS		6 Asbestos-Cement 9 Other (specify below)		Welded _____	
Blank casing diameter <u>5</u> in. to <u>40</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		7 Fiberglass		Threaded _____	
Casing height above land surface <u>14"</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>SDR 26</u>		TYPE OF SCREEN OR PERFORATION MATERIAL:			
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____		⑦ PVC 10 Asbestos-cement			
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 5 Gauzed wrapped ⑧ Saw cut 11 None (open hole)		2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes			
3 Torch cut 10 Other (specify) _____		SCREEN-PERFORATED INTERVALS: From <u>40</u> ft. to <u>60</u> ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From <u>40</u> ft. to <u>60</u> 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 <u>0</u> ft. to <u>20</u> 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 ⑩ Livestock pens 14 Abandoned water well		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? <u>North</u> How many feet? <u>6'</u>					
FROM TO LITHOLOGIC LOG		FROM TO		PLUGGING INTERVALS	
<u>0 20</u> <u>Topsoil, Fine to med. sand Clay mixed</u>					
<u>20 40</u> <u>med. sand & clay layer</u>					
<u>40 60</u> <u>Med. sand</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>2-19-91</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>533</u> This Water Well Record was completed on (mo/day/yr) <u>3-12-91</u> under the business name of _____ by (signature) <u>[Signature]</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, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					