

1 LOCATION OF WATER WELL:		Fraction <u>NE</u> $\frac{1}{4}$ N/C $\frac{1}{4}$ SW $\frac{1}{4}$	Section Number <u>27</u>	Township Number <u>T 26 S</u>	Range Number <u>R 27</u> 35W
Distance and direction from nearest town or city street address of well if located within city? <u>3 1/2 S, 4 1/2 E of Cimmaron</u>					
2 WATER WELL OWNER: <u>Carl Hubbell</u>					
RR#, St. Address, Box # :			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Spearville, KS 67876</u>			Application Number: <u>19543</u>		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>214</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>84</u> ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>84</u> ft. below land surface measured on mo/day/yr <u>4/29/95</u>			
		Pump test data: Well water was <u>211</u> ft. after <u>2</u> hours pumping <u>581</u> gpm			
		Est. Yield <u>600</u> gpm: Well water was ft. after hours pumping gpm			
		Bore Hole Diameter <u>26</u> in. to 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) <u>2 Irrigation</u> 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 <u>x</u> No			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
2 PVC		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
				8 Concrete tile	
				9 Other (specify below)	
				CASING JOINTS: Glued <u>X</u> Clamped	
				Welded	
				Threaded	
Blank casing diameter <u>16</u> in. to <u>134</u> ft., Dia. in. to ft., Dia. in. to ft.					
Casing height above land surface <u>12</u> in., weight <u>20.60</u> lbs./ft. Wall thickness or gauge No. <u>616</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				7 PVC	
				8 RMP (SR)	
				9 ABS	
				10 Asbestos-cement	
				11 Other (specify)	
				12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		3 Mill slot		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
				7 Torch cut	
				8 Saw cut	
				9 Drilled holes	
				10 Other (specify)	
				11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From <u>134</u> ft. to <u>214</u> ft., From ft. to ft.					
From ft. to ft., From ft. to ft.					
GRAVEL PACK INTERVALS: From <u>21</u> ft. to <u>214</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>21</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	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below)	
Direction from well? <u>N</u> How many feet? <u>260</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	12	Sand and Clay	214	218	Clay
12	16	Sand (fine)	218	224	Shale
16	32	Sand (fine)			
32	49	Sand and Gravel			
49	65	Sand and Gravel			
65	82	Sand and Gravel			
82	98	Sand and Gravel			
98	114	Sand			
114	132	Sand and Gravel 16			
132	148	Sand and Lt. Gravel 16			
148	164	Sand (med.) 16			
164	180	Sand(md.-fn.)&6' Clay 10			
180	196	Sand(md.) and Clay 10			
196	210	Sand(md.) and Clay mix 6			
210	214	Clay & 1' Hard Rock			
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>April 29, 1995</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>473</u> This Water Well Record was completed on (mo/day/yr) <u>May 1, 1995</u> under the business name of <u>Tyler Water Well Service</u> 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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

T

R

EW

SEC.

1/4

1/4

1/4