

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: MORTON	NE 1/4 NE 1/4 NE 1/4	28	T 31 S	R 39 EW

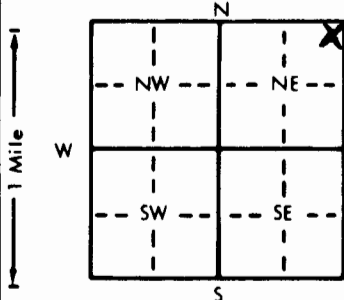
Distance and direction from nearest town or city street address of well if located within city?

N OF HUGOTON TO RIVER BEND FEED LOT SIGN W TO CO. LINE 1/4 SOUTH INTO LOC.2 WATER WELL OWNER: **SEABOARD FARMS CO.**RR#, St. Address, Box # : **P.O. BOX 1207**City, State, ZIP Code : **GUYMON, OK 73942****"TRUCK WASH"**

Board of Agriculture, Division of Water Resources

Application Number:

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

4 DEPTH OF COMPLETED WELL: **300** ft. ELEVATION:Depth(s) Groundwater Encountered 1. **195** ft. 2. ft. 3. ft.WELL'S STATIC WATER LEVEL **195** ft. below land surface measured on mo/day/yr **04-16-96**Pump test data: Well water was **215** ft. after **1** hours pumping **75** gpmEst. Yield **75** gpm: Well water was ft. after hours pumping gpmBore Hole Diameter **11** in. to **300** 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 *Hog farm*Was a chemical/bacteriological sample submitted to Department? Yes No **X**; If yes, mo/day/yr sample was submittedWater Well Disinfected? Yes **X** No

5 TYPE OF BLANK CASING USED:

1 Steel

3 RMP (SR)

5 Wrought iron

8 Concrete tile

CASING JOINTS: Glued **X** Clamped**2** PVC

4 ABS

6 Asbestos-Cement

9 Other (specify below)

Welded

7 Fiberglass

Threaded

Blank casing diameter **6** in. to **300** ft., Dia in. to ft., Dia in. to ft.Casing height above land surface **24** in., weight **2.902** lbs./ft. Wall thickness or gauge No. **.280 SDR 21**

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel

3 Stainless steel

5 Fiberglass

7 PVC

10 Asbestos-cement

2 Brass

4 Galvanized steel

6 Concrete tile

8 RMP (SR)

11 Other (specify)

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

7 Torch cut

10 Other (specify)

SCREEN-PERFORATED INTERVALS: From **220** ft. to **300** ft., From ft. to ft.

From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From **120** ft. to **300** 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**HOLE PLUG**Grout intervals: From **0** ft. to **16** 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

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	PLUGGING INTERVALS
0	2	CLAY	216	229	CLAY
2	27	CLAY & SANDY CLAY	229	242	SANDY CLAY & SAND
27	39	SANDY CLAY	242	275	COARSE SAND
39	64	CLAY	275	290	SAND
64	94	CLAY & SANDY CLAY	290	300	BLACK CLAY
94	107	CLAY			
107	114	SANDY CLAY			
114	120	SAND			
120	138	CLAY & SANDY CLAY			
138	149	CLAY			
149	171	CLAY & SANDY CLAY			
171	180	SANDY CLAY			
180	194	SAND			
194	200	SANDY CLAY			
200	216	CLAY & SANDY CLAY			

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) **04-16-96** and this record is true to the best of my knowledge and belief. KansasWater Well Contractor's License No. **KWCL-430** This Water Well Record was completed on (mo/day/yr) **04-16-96**under the business name of **HOWARD DRUG CO. BOX 806 BEAVER, OK 73932** by (signature) *Howard Drug Co.*

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.