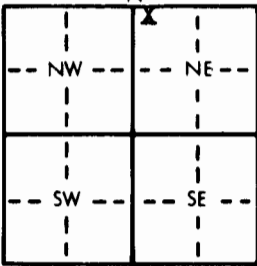


1 LOCATION OF WATER WELL: Fraction **NW 1/4 NW 1/4 NE 1/4** Section Number **32** Township Number **T 33 S** Range Number **R 33 EW**
 County: **Seward**

Distance and direction from nearest town or city street address of well if located within city?
7 North, 1/2 West of Liberal, Kansas

2 WATER WELL OWNER: **Bob Hatcher**
 RR#, St. Address, Box #: **1731 James Court** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **Liberal, Kansas 67901** Application Number: **----**

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

 4 DEPTH OF COMPLETED WELL: **346** ft. ELEVATION: **Slope**
 Depth(s) Groundwater Encountered 1. **185** ft. 2. **220** ft. 3. **310** ft.
 WELL'S STATIC WATER LEVEL **185** ft. below land surface measured on mo/day/yr
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield **50** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter **9 7/8** in. to **346** ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering ~~12 Other (Specify below)~~
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well **Stock**
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No **XXX**; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes **XXX** No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued **XX** Clamped _____
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
XX PVC 4 ABS 7 Fiberglass _____ Threaded _____
 Blank casing diameter **5** in. to **226** ft., ~~XX~~ **266** in. to **306** ft., Dia _____ in. to _____ ft.
 Casing height above land surface **12** in., weight **2.8** lbs./ft. Wall thickness or gauge No. **265**
 TYPE OF SCREEN OR PERFORATION MATERIAL: **XX** 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 **XX** 8 Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From **226** ft. to **266** ft., From **306** ft. to **346** ft.
 From ~~246~~ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **14** ft. to **346** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: **XX** Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From **4** ft. to **14** 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 **XX** 5 ~~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? **Southwest** How many feet? **1200**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	18	Fine Sand	328	335	Med. Sand
18	40	Clay & Sandy Clay	335	360	Clay w/Streaks Fine Sand
40	70	Fine Sand			
70	80	Clay			
80	95	Fine Sand			
95	135	Clay			
135	155	Med. Sand			
155	160	Clay			
160	200	Med. Sand			
200	220	Clay w/Streaks of Sand			
220	240	Fine Sand			
240	280	Fine Sand w/Clay Streaks			
280	310	Clay			
310	320	Med. Sand			
320	328	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) **August 25, 1982** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **252**. This Water Well Record was completed on (mo/day/yr) **September 2, 1982** under the business name of **Friesen Windmill & Supply Inc.** by (signature)

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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

T

33

R

33

EW

SEC.

32

NW 1/4

NW 1/4

NE 1/4