WATE	R WELL	RECORD	Form \	WWC-5	Div	ision of W	ater Reso	ources; App. No.			
1 LOCA	ATION OF	WATER WELL:	Fraction		1	Section N	lumber	Township Nui	nber	Range Numb	er
County: Stevens NE 1/4 SW 1/4 SW 1/4 30 T 33 S R 3/6 E/W Distance and direction from nearest town or city street address of well if Global Positioning System (decimal degrees, min. of 4 digits)											
located within city? 3 East 2 South of Hugoton Latitude:											
Longitude: 2 WATER WELL OWNER: A. J. Stegman Elevation:											_
2 WATER WELL OWNER: A. J. Stegman RR#, St. Address, Box # : 815 S. Van Buren City, State, ZIP Code : Hugoton, KS 67951						Elevation	ı:				
City. S	State, ZIP C	ode : Hugoto	n. KS 67951			Datum. Data Coll	lection N	Method:			
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 410 ft.											
LOCATON											
WITH	I AN "X" I	N Depth(s) Grour	ndwater Encou	intered 1			ft. 2		ft. 3		ft.
SECT	ION BOX	WELL'S STAT	ΓIC WATER I	LEVEL	ftft	below la	and surfa	ace measured on	mo/d	ay/yr	
Y N Pump test data: Well water was ft. after									oumpi	ng g	gpm
i Est. Yield gpm: Well water was ft. after hours pumping gp											gpm
NW NE WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well											
W E Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well											ow)
Was a chemical/bacteriological sample submitted to Department? Yes No ; If yes, mo/day/yrs											
S Sample was submitted Water Well Disinfected? Yes x No											
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped											
1 Ste	eel	3 RMP (SR) 6	Asbestos-Cen	nent 9	Other (s	specify be	elow)	Ţ	Velde	d	
2 PV	1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded 2 PVC 4 ABS 7 Fiberglass Eagle Loc Threaded										
2 PVC 4 ABS 7 Fiberglass Eagle Loc Threaded Blank casing diameter 5 in. to 410 ft., Dia in. to ft., Dia in. to ft. Casing height above land surface 24 in., Weight SDR 17 lbs./ft. Wall thickness or gauge No.											
Casing height above land surface 24 in., Weight SDR 17 lbs./ft. Wall thickness or gauge No.											
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)											
ISCREEN OR PERFORATION OPENINGS ARE:											
1 Continuous slot 3 Mill slot 5 Guaze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)											
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 300 ft. to 320 ft. From 340 ft. to 360 ft.											
SCREEN-	-PERFORA	TED INTERVALS:	From	300	It. to	320	tt. Fro	om 340	ft. to	360	tt.
CP.	AMEL DA	OF INTERMATE.	From	380	ft. to	400	II. Fro	om	π. το) 	- π. - Ω
UK	AVEL PA	CK INTERVALS:	From	25	ft to	410	ft. Fr	om	II. II) 	- H
C CDOI	TT MATE	DIAL. 1 Neat com	ant 2 Cama	nt arout	2 Ponto	nita	1 Othor			,	٠ ١٠.
Grout Inte	JI WIAIE	RIAL: 1 Neat cem	ient 2 Ceme	rom	3 Denio	to	4 Omer	From	· 	+ to	<u></u>
What is th	e nearest so	ource of possible con	tamination:	10111	^{11.}		¹ l.	FIUIII	• • • • • •	11. 10	n.
	tic tank	4 Lateral lir	nes 7 Pit privy	v 10) Livesto	ck pens	13 Inse	ecticide Storage		16 Other (spec	cify
2 Sew	ver lines	5 Cess pool	8 Sewage	lagoon 1				andoned water w	ell	below)	,
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well											
Direction from well? NA How many feet?											
FROM	TO		LOGIC LOG		FROM	TO		PLUGGING			
0	16	Topsoil & Brown a	ind Black Cla	ıy	240	280		and With Clich			
16	20	Sandy Clay			280	320		andy Clay Little			
20	25 52	Cliché Brown Clay and S	andy Clev		320 400	400	Grey C	ray and While	Clay	Little Sand Sto	ne
25 52	60	Fine Sand	anuy Clay		400	410	Grey	лау			
60	80	Sand and Gravel									
80	152	Brown Sandy Clay									
152	180	Sand Medium Lt C									
180	198	Sand Fine & Sand									
198	PACTOR'	Sandy Clay Few Sa	and Streaks	FICATIO	N. Thie	ater well :	was (1) a	onstructed (2) re	constr	ucted or (3) plus	nged
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) 6/8/10 and this record is true to the best of my knowledge and belief.											
Kansas Water Well Contractor's License No. 473 . This Water Well Record was completed on (mo/day/year) 6/10/10											
under the business name of Tyler Water Well by (signature)											
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Endrolment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for											
Geology Sec	tion 1000 SV	/ Jackson St., Suite 420, 7 of or each constructed well	loneka. Kansas 66	6612-1367. T	elephone 78	85-296-552	 Send or 	ne to WATER WEL	L OW	NEK and retain one	; ior
Jour records											