

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number	
County: Stevens		NW 1/4 NW 1/4 NW 1/4	16	T 33 S	R 37 E	
Distance and direction from nearest town or city street address or well if located within city?						
2 WATER WELL OWNER: Stevens County Highway Department						
RR#, St. Address, Box # : 510 W 1st St			Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : Hugoton, KS 67951			Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 140 ft. ELEVATION:				
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.				
		WELL'S STATIC WATER LEVEL 121.30 ft. below land surface measured on mo/day/yr 9-15-05				
		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 8 in. to 142.5 ft. and _____ in. to _____ ft.				
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well						
1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)						
2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well						
Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was submitted _____						
Water Well Disinfected? Yes _____ No X						
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 _____						
7 Fiberglass Threaded X						
Blank casing diameter 4 in. to 110 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.						
Casing height above land surface 0 in., weight 2.071 lbs./ft. Wall thickness or gauge No. .237						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement						
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____						
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 110 ft. to 140 ft. From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From 107 ft. to 140 ft. From _____ ft. to _____ ft.						
6 GROUT MATERIAL:						
1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Intervals From 0 ft. to 104 ft. From 104 ft. to 107 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) Contaminated site						
13 Insecticide storage						
Direction from well? _____ How many feet? _____						
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	.5		Asphalt	79	102	Caliche & clay
.5	3		Backfill	102	117	Sandy clay w/caliche strks
3	8		Clay	117	123	Sandy clay & caliche w/a few sand-stone strks
8	10		Fine sand w/sandy clay strks			
10	25		Clay	123	131	Caliche w/sandy clay
25	38		Fine sand w/sandy clay strks	131	142.5	Sandstone w/sandy clay & caliche
38	43		Clay			
43	51		Fine sand w/sandy clay strks			
51	58		Fine to some med sd w/clay			
			Strks			
51	58		Fine to some med sd w/clay strk			
58	73		Fine to some med sd w/clay &			
			Caliche strks			
73	79		Clay & caliche			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) 9-12-05 and this record is true to the best of my knowledge and belief. Kansas						
Water Well Contractor's License No. 554			This Water Well Record was completed on (mo/day/yr) 9-23-05			
under the business name of Woofter Pump & Well Inc.			by (signature) <i>[Signature]</i>			
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.						

OFFICE USE ONLY

T

R

SEC