

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <b>Stevens</b>	<b>SW ¼ SW ¼ NE ¼</b>	<b>16</b>	<b>33</b>	<b>37</b>
Distance and direction from nearest town or city street address of well if located within city?				
2 WATER WELL OWNER: <b>City of Hugoton</b>				
RR#, St. Address, Box # <b>112 #. 5<sup>th</sup> St</b>		Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <b>Hugoton, Ks 67951</b>		Application Number:		
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL <b>90</b> ft.		
		WELL'S STATIC WATER LEVEL <b>DRY</b> ft.		
		WELL WAS USED AS:		
		1 Domestic                      5 Public Water Supply                      9 Dewatering 2 Irrigation                      6 Oil Field Water Supply                      10 Monitoring Well 3 Feedlot                      7 Lawn and Garden (domestic)                      11 Injection Well 4 Industrial                      8 Air Conditioning                      12 Other		
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes _____ No <b>X</b>		
5 TYPE OF BLANK CASING USED:				
1 Steel                      3 RMP (SR)                      5 Wrought                      7 Fiberglass                      9 Other (specify below) <b>2 PVC</b> 4 ABC                      6 Asbestos-Cement                      8 Concrete Tile <b>OVERDRILLED 3 FT</b>				
Blank casing diameter <b>2</b> in. Was casing pulled? Yes _____ No _____ If yes, how much _____				
Casing height above or below land surface <b>- 3 FT</b> in.				
6 GROUT PLUG MATERIAL: 1 Neat cement    2 Cement grout    3 Bentonite    4 Other _____				
Grout Plug Intervals From <b>90</b> ft. to <b>3</b> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.				
What is the nearest source of possible contamination:				
1 Septic tank                      6 Seepage pit                      11 Fuel storage                      16 Other (specify below) 2 Sewer lines                      7 Pit privy                      12 Fertilizer storage 3 Watertight sewer lines                      8 Sewage lagoon                      13 Insecticide storage 4 Lateral lines                      9 Feedyard                      14 Abandoned water well 5 Cess Pool                      10 Livestock pens                      15 Oil well/ Gas well				
Direction from well? _____ How many feet? _____				
FROM	TO	CODE	PLUGGING MATERIALS	
<b>90</b>	<b>3</b>		<b>BENTONITE GROUT</b>	
			<b>OVERDRILLED 3 FT</b>	
<b>3</b>	<b>0</b>		<b>BACKFILL</b>	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <b>03-09-06</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>554</b> This Water Well Record was completed on (mo/day/yr) <b>04-14-06</b> under the business name of <b>Woofter Pump &amp; Well Inc.</b> by (signature) _____				
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 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.				