

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Stevens	SW ¼ SW ¼ NE ¼	16	33	37
Distance and direction from nearest town or city street address of well if located within city?				
2 Halliburton Mark Hull RR#, St. Address, Box # 428 S Monroe City, State, ZIP Code : Hugoton, Ks 67951 Board of Agriculture, Division of Water Resources Application Number:				
3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:		DEPTH OF WELL 146.5 ft.		
		WELL'S STATIC WATER LEVEL DRY 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 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 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile OVERDRILLED 3 FT Blank casing diameter 4 in. Was casing pulled? Yes _____ No _____ If yes, how much _____ Casing height above or below land surface - 3 FT in.				
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____				
Grout Plug Intervals From 146.5 ft. to 3 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	
146.5	3		BENTONITE GROUT	
			OVERDRILLED 3 FT	
3	0		BACKFILL	
7				
on (mo/day/yr) 03-07-06 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) 04-14-06 under the business name of Woofter Pump & Well Inc.				
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.				