

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <b>Stevens</b>		<b>NN 1/4 NW 1/4 SE 1/4</b>	<b>16</b>	T <b>33</b> S	R <b>37</b> EW
Distance and direction from nearest town or city street address of well if located within city? <b>Associate Enviromental, Inc.</b>					
2 WATER WELL OWNER: <b>Taylor Food Mart # 627</b>					
RR#, St. Address, Box # : <b>700 Main</b>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <b>Hugoton, Ks</b>			Application Number: <b>MW -1R</b>		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <b>130</b> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.			
		WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr			
		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 <b>8</b> in. to <b>131</b> 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) <b>10</b> Monitoring well					
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 Iron	
<b>2</b> PVC		4 ABS		8 Concrete tile	
				6 Asbestos-Cement	
				9 Other (specify below)	
				7 Fiberglass	
				CASING JOINTS: Glued _____ Clamped _____	
				Welded _____	
				Threaded <b>X</b>	
Blank casing diameter <b>4</b> in. to <b>80</b> ft. Dia		in. to _____ ft. Dia		in. to _____ ft. Dia	
Casing height above land surface <b>0</b> in., weight <b>2.071</b> lbs./ft.		Wall thickness or gauge No. <b>.237</b>			
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		8 RMP (SR)	
				9 ABS	
				10 Asbestos-cement	
				11 Other (specify)	
				12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		3 Mill slot		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
				7 Torch cut	
				<b>8</b> Saw cut	
				9 Drilled holes	
				10 Other (specify)	
				11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From <b>80</b> ft. to <b>130</b> ft. From _____ ft. to _____ ft.					
From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <b>78</b> ft. to <b>130</b> ft. From _____ ft. to _____ ft.					
From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout intervals From <b>0</b> ft. to <b>74</b> ft. From <b>74</b> ft. to <b>76</b> ft. From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines		7 Pit privy	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/ Gas well	
				16 Other (specify below)	
<b>CONTAMINATED SITE</b>					
Direction from well? _____ How many feet? _____					
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
<b>0</b>	<b>.5</b>		<b>Cement</b>		
<b>.5</b>	<b>10</b>		<b>Clay</b>	<b>79</b>	<b>86</b>
<b>10</b>	<b>15</b>		<b>silt w/clay strks</b>	<b>86</b>	<b>90</b>
<b>15</b>	<b>30</b>		<b>Silt w/clay lenses</b>	<b>90</b>	<b>105</b>
<b>30</b>	<b>39</b>		<b>Fine sd w/clay lens</b>	<b>105</b>	<b>120</b>
<b>39</b>	<b>45</b>		<b>Fine sand w/clay strks</b>	<b>120</b>	<b>131</b>
<b>45</b>	<b>50</b>		<b>Fine sd w/clay strks</b>		
<b>50</b>	<b>60</b>		<b>Med sd w/small gravel &amp; clay</b>		
			<b>Strks</b>		
<b>60</b>	<b>68</b>		<b>Med sd w/small gravel &amp; clay</b>		
			<b>Strks</b>		
<b>68</b>	<b>75</b>		<b>Caliche &amp; clay w/med sd &amp;</b>		
			<b>Gravel strks</b>		
<b>75</b>	<b>79</b>		<b>Caliche &amp; clay w/med sd &amp;</b>		
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/yr) <b>10-11-06</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>11-10-06</b>		
under the business name of <b>Woofor Pump &amp; Well Inc.</b>			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.					

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