	WELL R		orm W				sion of Water			MW-4	
	Record			n Well Use			irces App. No.		Well ID		
I LOCATION OF WATER WELL: County: Stevens			, ,	Fraction SE 4 SE 4 SE 1	4 SE 4	Sect	on Number Township Numb		er Range Number R 37 🗀 E 🖿 W		
2 WELL				First	Street o	Street or Rural Address where well is located (if unknown, distance and					
	Frontier F				direction	from no	carest town or in	stersection): If at owne	r's address,	check here: 🔲 📗	
Address: Address:	P.O. Box	148			In ROV	In ROW east of 1017 S. Washington, Hugoton, KS 67951					
City:	Sinte	: KS	ZIP: 67905					•			
3 LOCATI		4646			07 17047	/EA					
	WITH "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL Depth(s) Groundwater Encountered: 1)										
DECITOR BOX.				countered: 1)	II	-11	Longitude: 101,3392284 (decimal degrees) Horizontal Datum: □ WGS 84 ■ NAD 83 □ NAD 27				
WELL'S STATIC W					7.68 n	CIL		<u>lai Datum:</u> U WGS 8 <u>or Latitude/Longitude</u>		83 LI NAD 27	
		below land surface, measured on (mo-day-yr				1-17	Sporce 1	S (unit make/model:	EPOCH	1	
NW	NE	above land	above land surface, measured on (mo-day-yr					(WAAS enabled?	Yes 🔳	No)	
		Pump test data: Well water was				☐ Land Survey ☐ Topographic Map					
W	E	after	after hours pumping gr			Online Mapper:					
sw	SE	200	Well water was								
		Estimated Yield:gpm			ghm	6 Elevation: 3108.55			d Level 📕 TOC		
		Bore Hole Diam	Bore Hole Diameter:8.5 in. to			- 11. 44.0			Survey 🔲 GPS 🔲 Topographic Map		
1 n	nile			in to				☐ Other			
7 WELL WATER TO BE USED AS:											
1. Domestic:				Supply: well ID				Field Water Supply: 1			
. =	☐ Household 6. ☐ Dewaterin			g: how many wells?			11. Test Hole: well ID				
. —	☐ Lawn & Garden 7. ☐ Aquifer R ☐ Livestock 8. ■ Monitorin			echarge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?				
	2. Irrigation 9. Environment				al Remediation: well ID			a) Closed Loop Horizontal Vertical			
3. Feedlot Air Sparge							b) Open Loop Surface Discharge Inj. of Water				
4. 🔲 Industr	ial	☐ Re	covery	☐ Injection				er (specify):			
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:											
Water well disinfected? ☐ Yes ■ No											
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other											
Casing diameter 4 in to 108 fl., Diameter in to fl., Diameter in to fl., Diameter in to fl. Casing height above land surface 6 in Weight lbs/ft. Wall thickness or gauge No. Sch. 40											
Casing height above land surface											
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Stainless Steel Fiberglass PVC Other (Specify)											
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE:											
☐ Continuous Slot ■ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)											
Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From 111.5 ft. to 151.5 ft., From											
GRAVEL PACK INTERVALS: From 108 ft. to 151.5 ft., From ft. to											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Concrete 0-1ft Grout Intervals: From 1 ft. to 108 ft., From ft. to ft., From ft. to ft.											
Nearest source of possible contamination:											
Septic Tank											
☐ Sewer		☐ Cess		Sewage !			Fuel Storage		oned Water		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well											
Other (Specify) Direction from well? .SW											
10 FROM	TO	LIT	HOLOGI	C LOG	FRO		TO L	JTHO. LOG (cont.) o	r PLUGGIN	G INTERVALS	
0		Concrete with re			 						
0.5		Clayey Silt with									
20	50	Sand									
50		Sand with trace									
65		Sand with calich									
73				caliche & pebble							
89	152	Clay and calich	e with s	and	Note	s: Ex	opress Lane #2	4 site; KDHE project of	oda: U1-09	5-14878	
	 										
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
under my jurisdiction and was completed on (mo-day-year) .3.3.17 and this record is true to the best of my knowledge and belief.											
Kansas Wa	iter Well Co	ntractor's License	c No88	1 This \	Vater We	il Rec	ord was copy	ploted on (mo-day-)	<i>μ</i> εατ)		
under the b	ousiness nam	e of .Waatter.P.	ump an	d Well		Sig	anature	Cense)	Barrie	
Mail I white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.											
Visit us at htm://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										d 7/10/2015	

