

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>STEVENS</u>		<u>NE 1/4 NE 1/4 SW 1/4</u>	<u>6 2</u>	<u>T33 S</u>	<u>R 39 E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>6 mi west of Hugoton</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # : <u>HCO1 BOX 49C</u>		Application Number:			
City, State, ZIP Code : <u>HUGOTON, KANSAS 67951</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL... 350'..... ft. ELEVATION:			
 1 Mile W E S E		Depth(s) Groundwater Encountered <u>1.150'</u> ft. 2..... ft. 3..... ft.			
		WELL'S STATIC WATER LEVEL <u>150'</u> ft. below land surface measured on mo/day/yr <u>4-20-94</u>			
		Pump test data: Well water was ft. after hours pumping gpm			
		Est. Yield <u>30</u> gpm: Well water was ft. after hours pumping gpm			
Bore Hole Diameter. <u>12</u> in. to <u>15</u> ft., and <u>9</u> in. to <u>350</u> ft.					
WELL WATER TO BE USED AS:		5 Public water supply 8 Air conditioning 11 Injection well			
<u>1 Domestic</u> 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)					
<u>2 Irrigation</u> 4 Industrial 7 Lawn and garden only 10 Monitoring well					
Was a chemical/bacteriological sample submitted to Department? Yes.....No..... <u>x</u>; If yes, mo/day/yr sample was submitted		Water Well Disinfected? Yes <u>x</u> No			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <u>X</u> Clamped.....			
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded.....					
2 PVC 4 ABS 7 Fiberglass..... Threaded.....					
Blank casing diameter <u>5</u> in. to <u>+2-350'</u> ft., Dia..... in. to..... ft., Dia..... in. to..... ft.					
Casing height above land surface... <u>+2</u> in., weight <u>SCH-40 Steel</u> lbs./ft. Wall thickness or gauge No.					
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC 10 Asbestos-cement			
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)					
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:		8 Saw cut 11 None (open hole)			
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes					
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)					
SCREEN-PERFORATED INTERVALS: From..... <u>195'</u> ft. to <u>345'</u> ft., From..... ft. to..... ft.					
From..... ft. to..... ft., From..... ft. to..... ft.					
GRAVEL PACK INTERVALS: From..... <u>350</u> ft. to <u>80'</u> 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..... <u>80'</u> ft. to <u>0</u> ft., From..... ft. to..... ft., From..... ft. to..... ft.					
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well			
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well					
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage					
Direction from well?		How many feet? <u>40'</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	80'	Surface, calICHE CLAY & sand			
80	120	Med to coarse sand & sandy clay			
120	160	Clay, sandy clay & fine sand			
160	200	Clay, sandy clay & fine sand strips			
200	240	Clay, sandy clay & fine sand strips			
240	280	Clay, sandy clay & fine sand strips			
280	320	Med to coarse sand & gravel w/clay strips			
320	340	Med to coarse sand w/clay strips			
340	350	Red clay			
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/year) <u>4-20-94</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>548</u> This Water Well Record was completed on (mo/day/yr) <u>4-24-94</u> under the business name of <u>LES TAYLOR DRILLING CO.</u> by (signature) <u>Les Taylor</u>					
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

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