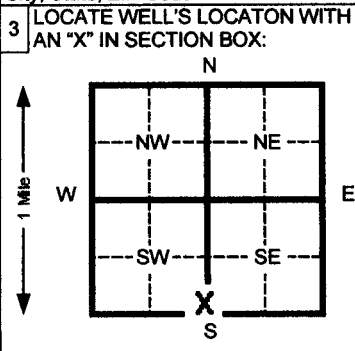


1 LOCATION OF WATER WELL: County: Seward	Fraction SE ¼ SE ¼ SW ¼	Section Number 9	Township Number T 34 S	Range Number R 34 EW
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Distance and direction from nearest town or city street address of well if located within city?
4 West , 2 North of Liberal

2 WATER WELL OWNER: **Nick Hatcher**
 RR#, St. Address, Box # : **7 east 11th St.**
 City, State, ZIP Code : **Liberal Ks 67901**

Board of Agriculture, Division of Water Resources
 Application Number: **45746**



4 DEPTH OF COMPLETED WELL **700** ft. ELEVATION: _____

Depth(s) Groundwater Encountered 1 **250** ft. 2 _____ ft. 3 _____ ft.

WELL'S STATIC WATER LEVEL **250** ft. below land surface measured on mo/day/yr **3/10/05**

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 **26** in. to _____ 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) 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X** If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes **X** No _____

5 TYPE OF BLANK CASING USED:

1 <u>Steel</u>	3 RMP (SR)	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below) _____	Welded X
		7 Fiberglass		Threaded _____

Blank casing diameter **16** in. to **700** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. **.250**

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 <u>Steel</u>	3 Stainless steel	5 Fiberglass	7 PVC	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	8 RMP (SR)	11 Other (specify) _____
			9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 <u>Louvered shutter</u>	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From **420** ft. to **460** ft. From **500** ft. to **540** ft.
 From **580** ft. to **620** ft. From **660** ft. to **700** ft.

GRAVEL PACK INTERVALS: From _____ ft. to _____ ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout Intervals From **3** ft. to **25** ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/ Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below) _____
			13 Insecticide storage	None Observed

Direction from well? _____ How many feet? _____

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	70		Top Soil & sandy clay			
70	95		Fine sand			
95	100		Sandy clay			
100	147		Fine sand & some clay			
147	180		Brown & white clay ; a little calic			
180	280		Fine to med sand a little clay			
280	305		Fine sand & clay			
305	332		Red & brown clay			
332	380		Fine sand & a little clay			
380	440		Fine to med sand ; some clay			
440	500		Fine sand & a little yellow clay			
500	690		Fine sand & a little brown clay			
690	700		Red bed			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was **CONSTRUCTED**

completed on (mo/day/yr) **3/11/05** and this record is true to the best of my knowledge and belief. Kansas
 Water Well Contractor's License No. **473** This Water Well Record was completed on (mo/day/yr) **3/13/05**
 under the business name of **Tyler water 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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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