

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																																				
County: Stevens	SW ¼ SW ¼ NE ¼	16	34	37																																				
Distance and direction from nearest town or city street address of well if located within city?																																								
2 WATER WELL OWNER: City of Hugoton																																								
RR#, St. Address, Box # 112 #. 5th St		Board of Agriculture, Division of Water Resources																																						
City, State, ZIP Code : Hugoton, Ks 67951		Application Number:																																						
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	DEPTH OF WELL 102 ft. WELL'S STATIC WATER LEVEL DRY ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden (domestic) 8 Air Conditioning </div> <div> 9 Dewatering <input checked="" type="checkbox"/> 10 Monitoring Well 11 Injection Well 12 Other AIR SPARGE </div> </div>																																							
	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:																																								
<div style="display: flex; justify-content: space-between;"> <div> 1 Steel <input checked="" type="checkbox"/> 2 PVC Blank casing diameter 4 in. </div> <div> 3 RMP (SR) 4 ABC Was casing pulled? Yes _____ No _____ </div> <div> 5 Wrought 6 Asbestos-Cement If yes, how much _____ </div> <div> 7 Fiberglass 8 Concrete Tile If yes, how much _____ </div> <div> 9 Other (specify below) OVERDRILLED 3 FT </div> </div>																																								
Casing height above or below land surface - 3 FT in.																																								
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="checkbox"/> 3 Bentonite 4 Other _____																																								
Grouting Intervals From 102 ft. to 3 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																								
_____ is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div> 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool </div> <div> 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens </div> <div> 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/ Gas well </div> <div> 16 Other (specify below) _____ </div> </div>																																								
Direction from well? _____ How many feet? _____																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:10%;">CODE</th> <th style="width:70%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>102</td> <td>3</td> <td></td> <td>BENTONITE GROUT</td> </tr> <tr> <td></td> <td></td> <td></td> <td>OVERDRILLED 3 FT</td> </tr> <tr> <td>3</td> <td>0</td> <td></td> <td>BACKFILL</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>					FROM	TO	CODE	PLUGGING MATERIALS	102	3		BENTONITE GROUT				OVERDRILLED 3 FT	3	0		BACKFILL																				
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed 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 Woofert 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.																																								