

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number	
County: <u>Stevens</u>		<u>SE 1/4 SE 1/4 SE 1/4</u>	<u>34</u>	<u>T 34 S</u>	<u>R 37 EW</u>	
Distance and direction from nearest town or city street address of well if located within city?						
<u>From SW Corner of Hugoton - 9 mi south on Road 12 - 2 mi East on Road D</u>						
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources				
RR#, St. Address, Box #		Application Number:				
City, State, ZIP Code		<u>Hugoton, KS 67957</u>				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL				
		ft. ELEVATION: _____				
		Depth(s) Groundwater Encountered _____ ft. _____ ft. _____ ft.				
		WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr <u>6-21-06</u>				
		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 _____ 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 2 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 <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____				
		Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____				
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued _____ Clamped _____				
1 Steel 3 RMP (SR)		Welded _____				
2 PVC 4 ABS		Threaded _____				
Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.						
Casing height above land surface _____ in., weight _____ 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:		5 Gauzed wrapped 8 Saw cut 11 None (open hole)				
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 10 Other (specify) _____						
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____						
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.						
6 GROUT MATERIAL:		4 Other _____				
1 Neat cement 2 Cement grout 3 Bentonite						
Grout Intervals From _____ ft. to _____ 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? _____				
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
				145	110	Gravel Fill
				110	86	Bentonite Plug
				86	15	Gravel Fill
				15	4	Cement Plug
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) <u>6-21-06</u> and this record is true to the best of my knowledge and belief. Kansas						
Water Well Contractor's License No. <u>473</u> This Water Well Record was completed on (mo/day/yr) <u>6-25-06</u>						
under the business name of <u>Tyler Water Well Serv</u> by (signature) <u>Paul L. L...</u>						
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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