
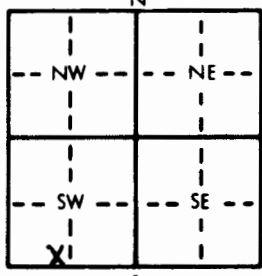


1 LOCATION OF WATER WELL: County: GRAHAM Fraction: SE 1/4 SW 1/4 SW 1/4 Section Number: 6 Township Number: T 7 S Range Number: R 25 

Distance and direction from nearest town or city street address of well if located within city?  
8N 1/2 E STUDLEY KS

2 WATER WELL OWNER: EARL SHUGHART  
 RR#, St. Address, Box #: PO BOX 159  
 City, State, ZIP Code: HILL CITY, KS 67642  
 Board of Agriculture, Division of Water Resources  
 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
  
 4 DEPTH OF COMPLETED WELL. X 94 ft. ELEVATION:  
 Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL X Dry ft. below land surface measured on mo/day/yr  
 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:  
 Domestic     Feedlot     Oil field water supply     Dewatering     12 Other (Specify below)  
 2 Irrigation     4 Industrial     7 Lawn and garden only     10 Monitoring well  
 Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted  
 Water Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED:  
 Steel     3 RMP (SR)  
 2 PVC     4 ABS  
 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:  
 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:  
 1 Continuous slot     3 Mill slot     5 Gauzed wrapped     8 Saw cut     11 None (open hole)  
 2 Louvered shutter     4 Key punched     6 Wire wrapped     9 Drilled holes  
 7 Torch cut     10 Other (specify) ....  
 SCREEN-PERFORATED INTERVALS: From .... ft. to .... ft., From .... ft. to .... 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 .... ft. to .... 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     11 Fuel storage     14 Abandoned water well  
 2 Sewer lines     5 Cess pool     8 Sewage lagoon     12 Fertilizer storage     15 Oil well/Gas well  
 3 Watertight sewer lines     6 Seepage pit     9 Feedyard     13 Insecticide storage     Other (specify below) NONE  
 Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	X PLUGGING INTERVALS
			96	70	Gravel
			70	40	Clay
			40	2	Top Soil
			2	0	Cement

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) X 10-2-88 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .... This Water Well Record was completed on (mo/day/yr) X 11-17-88 under the business name of ..... by (signature) Francis Clayton

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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.

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