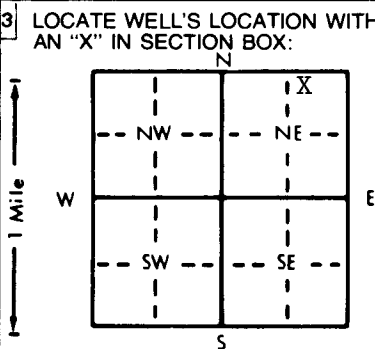


| | | | | |
|---------------------------|----------------|----------------|-----------------|---------------------|
| 1 LOCATION OF WATER WELL: | Fraction | Section Number | Township Number | Range Number |
| County: WABAUNSEE | NW ¼ NE ¼ NE ¼ | 17 | T 10 S | R 12 EXX |

Distance and direction from nearest town or city street address of well if located within city?
 1/2 MILE SOUTH & 1.5 MILES WEST OF ST. MARYS KS.

2 WATER WELL OWNER: HARRIET TANGYE
 RR#, St. Address, Box # : 415 W. MISSION Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : ST. MARYS KS 66536 Application Number: 27513



4 DEPTH OF COMPLETED WELL 46 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 18 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL .18 ft. below land surface measured on mo/day/yr 4-4-96
 Pump test data: Well water was .29 ft. after .1 hours pumping .700 gpm
 Est. Yield .1000 gpm: Well water was .32 ft. after .2 hours pumping .1000 gpm
 Bore Hole Diameter .32 in. to .46 ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feedlot 6 Oil field water supply 9 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 sub-
 mitted Water Well Disinfected? Yes _____ No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
 2 PVC 4 ABS 7 Fiberglass Threaded _____
 Blank casing diameter .16 in. to .26 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface .12 in., weight _____ lbs./ft. Wall thickness or gauge No. .50
 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
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From .26 ft. to .46 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From .18 ft. to .46 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 .0 ft. to .18 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 _____
 Direction from well? NORTH How many feet? 20

| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|----|--|------|----|--------------------|
| 0 | 2 | BLACK TOP SOIL | | | |
| 2 | 18 | BROWN SANDY SILT | | | |
| 18 | 24 | SMALL-MEDIUM BROWN GRAVEL & ORGANIC MATTER (WOOD & CHARCOAL) | | | |
| 24 | 31 | MEDIUM GREEN GRAVEL | | | |
| 31 | 40 | MEDIUM-LARGE GREY GRAVEL & GREY CLAY | | | |
| 40 | 46 | MEDIUM-LARGE GREY GRAVEL | | | |
| | 46 | WEATHERED SHALE , STOPPED | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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) 4-4-96 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 323. This Water Well Record was completed on (mo/day/yr) 5-1-96 under the business name of HOUBLER DRILLING CO. by (signature) Daniel Hoobler

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.