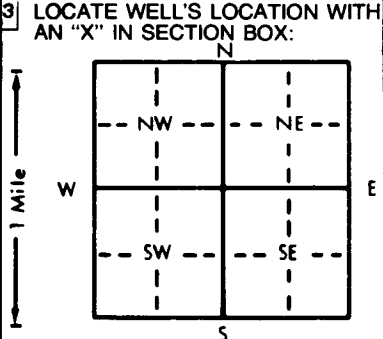


1 LOCATION OF WATER WELL: County: Wab. Fraction: N 1/2 3/4 S 1/2 3/4 S.W. 1/4 Section Number: 28 Township Number: T 10 S Range Number: R 12 E/W

Distance and direction from nearest town or city street address of well if located within city?
3 miles south of St. Marys, Ks.

2 WATER WELL OWNER: Bert Falley
 RR#, St. Address, Box #: 1632 N.W. Grove Ave. Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Topeka, Ks. 66606 Application Number: 41,198



4 DEPTH OF COMPLETED WELL: 57 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 25 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 25 ft. below land surface measured on 6-30-94
 Pump test data: Well water was 38 ft. after 1 hours pumping 700 gpm
 Est. Yield 1200 gpm: Well water was 41 ft. after 2 hours pumping 1200 gpm
 Bore Hole Diameter: 32 in. to 57 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 XX; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes _____ No XX

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued XX Clamped XX
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing diameter 16 in. to 47 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:
 1 Steel 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 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From 47 ft. to 57 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 20 ft. to 57 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 20 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
 Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	4	Black top soil			
4	26	Brown and grey clays			
26	33	Small grey gravel and grey clay			
33	39	Grey clay			
39	42	Small grey gravel			
42	48	Medium grey gravel			
48	49	Small grey gravel			
49	57	Medium-large grey gravel			
	57	White 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) 7-20-94 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) 8-19-94 under the business name of Hoodler Drilling Co. by (signature) [Signature]

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.