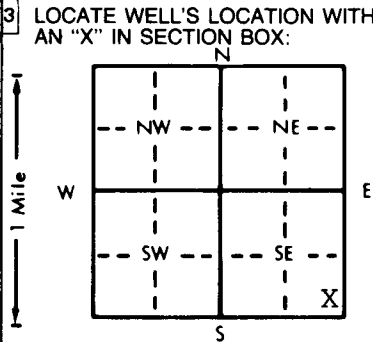


1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>SHAWNEE</u>	SE 1/4 SE 1/4 SE 1/4	31	T 10 S	R 15 E/W

Distance and direction from nearest town or city street address of well if located within city?  
 2 miles south, 5 east of Grove

2 WATER WELL OWNER: Arlen Kirckwood  
 RR#, St. Address, Box # : 6638 NW 46th  
 City, State, ZIP Code : Topeka, KS 66618  
 Board of Agriculture, Division of Water Resources  
 Application Number:



4 DEPTH OF COMPLETED WELL... 120' ft. ELEVATION: .....

Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.

WELL'S STATIC WATER LEVEL .. 25' ft. below land surface measured on mo/day/yr .. 11/30/98 ..

Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm

Est. Yield .5 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

Bore Hole Diameter .. 8 3/4 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	3 Feedlot	6 Oil field water supply
2 Irrigation	4 Industrial	9 Dewatering
	7 Lawn and garden only	10 Monitoring well
		12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes.....No.....X.....; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes X No

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped .....
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded .....
		7 Fiberglass		Threaded .....

Blank casing diameter ..... 5" in. to ..... 0-26 ft., Dia ..... 5" in. to ..... 81-119 ft., Dia ..... in. to ..... ft.

Casing height above land surface ..... 24" in., weight ..... 2.82 lbs./ft. Wall thickness or gauge No. .... 258

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 ..... 26 ft. to ..... 81 ft., From ..... ft. to ..... ft.

From ..... 119 ft. to ..... 120 ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From ..... 24 ft. to ..... 120 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 ..... 4 ft. to ..... 24 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? WEST How many feet? 230'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Top Soil	113	117	Shale-Grey
2	10	Clay-Brown	117	119	Limestone-Grey
10	23	Shale-Tan	119	120	Shale-Grey
23	30	Sandy Shale-Grey			
30	42	Sandstone-Grey			
42	43	Limestone-Grey			
43	50	Sandstone-Grey			
50	54	Shale-Grey			
54	66	Sandstone-Grey			
66	68	Shale-Grey			
68	72	Sandstone-Grey			
72	73	Limestone-Grey			
73	74	Sandstone-Grey			
74	108	Shale-Grey			
108	113	Limestone-Grey			

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) .. 11/30/98 .. and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .... 182 .. This Water Well Record was completed on (mo/day/yr) 12-10-98 .. under the business name of STRADER DRILLING CO., INC. by (signature) Dale Strader

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.