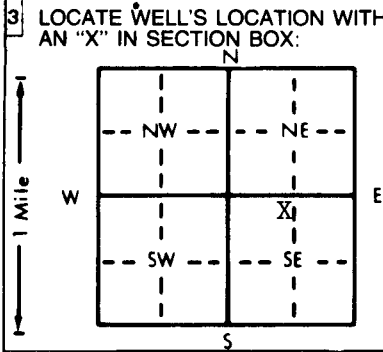


1 LOCATION OF WATER WELL: County: SHAWNEE Fraction: CENTER OF N. SIDE NE 1/4 NW 1/4 SE 1/4 Section Number: 11 Township Number: T 11 S Range Number: R 13 E/W

Distance and direction from nearest town or city street address of well if located within city?
 1 MILE SOUTH OF ROSSVILLE KS. & 1/2 ~~WEST~~ EAST

2 WATER WELL OWNER: DON BERKEY
 RR#, St. Address, Box #: 13420 NW 39TH Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: ROSSVILLE KS 66533 Application Number: 3294



4 DEPTH OF COMPLETED WELL: 40 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered: 1. 16 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 16 ft. below land surface measured on mo/day/yr 4-17-96
 Pump test data: Well water was 19 ft. after 1 hours pumping 500 gpm
 Est. Yield: 800 gpm: Well water was 37 ft. after 2 hours pumping 800 gpm
 Bore Hole Diameter: 32 in. to 40 ft., and _____ in. to _____
 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 X; 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 20 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:
 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 .20 ft. to 40 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From .16 ft. to 40 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 16 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	BROWN SILT			
4	11	FINE BROWN SAND			
11	16	MED-LARGE BROWN GRAVEL & GREY CLAY			
16	36	MEDIUM- LARGE BROWN GRAVEL			
36	38	MED-LARGE GREY GRAVEL & GREY CLAY			
38	40	MEDIUM GREEN GRAVEL			
	40	WEATHERED SHALE			

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) 4-17-96 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) Dan 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.