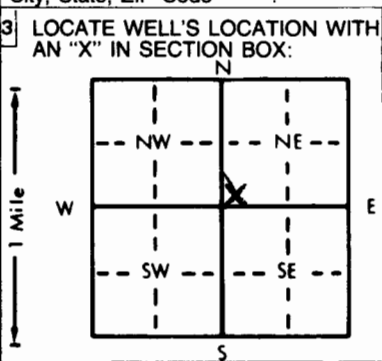


1 LOCATION OF WATER WELL: County: SHAWNEE Fraction: SW 1/4 SW 1/4 NE 1/4 Section Number: 28 Township Number: T 11 S Range Number: R 16 E/W

Distance and direction from nearest town or city street address of well if located within city?
PERRY AUTO 800 CHESTER ST - TOPEKA

2 WATER WELL OWNER: NINA EDWARDS
RR#, St. Address, Box #: 1608 PLANTATION - MOUNTAIN HOME ARK 72682 Kansas Department of Agriculture, Division of Water Resources
City, State, ZIP Code: _____ Application Number: _____



4 DEPTH OF COMPLETED WELL: 35 ft. ELEVATION: _____
Depth(s) Groundwater Encountered 1. 16.9 ft. 2. 25.2 ft. 3. 26.7 ft.
WELL'S STATIC WATER LEVEL: 27.94 ft. below land surface measured on mo/day/yr 07-15-94
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: 8.625 in. to 35 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 X; If yes, mo/day/yr sample was submitted _____
Water Well Disinfected? Yes _____ No X

5 TYPE OF BLANK CASING USED:
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
7 Fiberglass Threaded X
Blank casing diameter 2 in. to 20 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
Casing height above land surface: FLUSH in., weight SCH 40 lbs./ft. Wall thickness or gauge No. _____
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) _____
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 20 ft. to 35 ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 17 ft. to 35 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 6 ft. to 14 ft., From 14 ft. to 17 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 TK-REMOVED 16 Other (specify below) _____
Direction from well? _____ How many feet? CONTAMINATED SITE

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>6L</u>	<u>1</u>	<u>FILL SAND</u>			
<u>1</u>	<u>9</u>	<u>CLAY SILT</u>			
<u>9</u>	<u>20</u>	<u>SILTY SAND</u>			
<u>20</u>	<u>30</u>	<u>CLAY SILT</u>			
<u>30</u>	<u>35</u>	<u>SAND</u>			
<u>TD</u>	<u>35</u>				
<u>FLUSH MOUNT WAIVER</u>					
<u>DOV TAYLOR 07-18-94</u>					

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) 07-12-94 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 409 This Water Well Record was completed on (mo/day/yr) 08-12-94 under the business name of EBBERTS DRILLING by (signature) Susan Ebberts