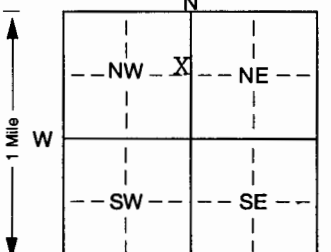


## KSA 82a-1212 ID No.

1 LOCATION OF WELL: Fraction		Section Number		Township Number		Range Number	
County: Wyandotte		SE 1/4 NE 1/4 NW 1/4		18		T 12 S R 23 EW	
Distance and direction from nearest town or city street address of well if located within city?							
1 1/2 miles SW of Bonner Springs							
2 WATER WELL OWNER: Jim Kreider				Well #2			
RR#, St. Address, Box # : 13461 142nd St				Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : Bonner Springs, KS 66012				Application Number: 44031			
3 LOCATE WELL'S LOCATION WITH		4 DEPTH OF COMPLETED WELL... 52'..... ft. ELEVATION:.....					
AN "X" IN SECTION BOX:		Depth(s) Groundwater Encountered 1..... ft. 2..... ft. 3..... ft.					
		WELL'S STATIC WATER LEVEL 28'-7"..... ft. below land surface measured on mo/day/yr .... 06/19/00.....					
		Pump test data: Well water was 37'-6"..... ft. after .... 2..... hours pumping .. 522..... gpm					
		Est. Yield .. 450..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm					
		Bore Hole Diameter. 24 1/8"..... 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 9 Dewatering 12 Other (Specify below)					
		2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 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 X No					
5 TYPE OF BLANK CASING USED:							
1 Steel		3 RMP (SR)		5 Wrought iron		8 Concrete tile	
2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)	
				7 Fiberglass		CASING JOINTS: Glued..... Clamped.....	
						Welded XX.....	
						Threaded.....	
Blank casing diameter ..... 1.6"..... in. to ... 0-37'..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.							
Casing height above land surface. .... 20"..... in., weight ..... 42..... lbs./ft. Wall thickness or gauge No. .... 250.....							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel		5 Fiberglass		7 PVC	
2 Brass		4 Galvanized steel		6 Concrete tile		8 RMP (SR)	
						9 ABS	
						10 Asbestos-cement	
						11 Other (specify) .....	
						12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:							
1 Continuous slot		( .080" ) slot		5 Gauzed wrapped		8 Saw cut	
2 Louvered shutter		4 Key punched		6 Wire wrapped		9 Drilled holes	
				7 Torch cut		10 Other (specify) .....	
						11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From..... 37..... ft. to ..... 52'..... ft., From..... ft. to..... ft.							
GRAVEL PACK INTERVALS: From..... 20..... ft. to ..... 52'..... 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	
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage	
						13 Insecticide storage	
						14 Abandoned water well	
						15 Oil well/Gas well	
						16 Other (specify below)	
						open field.....	
Direction from well? How many feet?							
FROM		TO		LITHOLOGIC LOG		FROM TO PLUGGING INTERVALS	
0		4		Top soil			
4		18		Silt-brown			
18		22		FS-brown			
22		26		FS-CS-med gravel-brown			
26		28		FS-CS-brwon			
28		30		FS-CS-med gravel-dirty			
30		41		FS-CS-med gravel pea-brown			
41		52		FS-CS-med pea-black			
52		53		Boulders			
53		54		Shale-grey			
54		-		LS-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) .... 06/19/00..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. .... 182..... This Water Well Record was completed on (mo/day/yr) .... 8-2-00..... under the business name of Strader Drilling Co., INC by (signature) Dale Skerren							
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 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.							