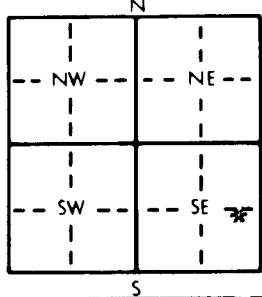


1 LOCATION OF WATER WELL: Fraction SE 1/4 SE 1/4 SE 1/4 Section Number 28 Township Number T 12 S Range Number R 3 E**
 County: Dickinson

Distance and direction from nearest town or city street address of well if located within city?
1/4 miles West of Chapman, Ks & 1/4 mile North

2 WATER WELL OWNER: Bud Potter
 RR#, St. Address, Box #: Rt 5 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Abilene, Kansas 67410 Application Number: _____

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: 118 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 81 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 78 ft. below land surface measured on mo/day/yr 2 / 9 / 91
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 15+ gpm; Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter 9 in. to 118 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 *; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes * No _____

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 _____

Blank casing diameter 5 in. to 118 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 15 in., weight 160 lbs./ft. Wall thickness or gauge No. 214

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 78 ft. to 118 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 25 ft. to 118 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 3 ft. to 25 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? EAST How many feet? 130

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	LITE COLOR CLAY & SHALE	74	81	HARD LITE COLOR LIMESTONE
3	7	LITE RED CLAY & SHALE	81	86	FLINT & DARK LIMESTONE
7	17	LITE COLOR SHALE	86	99	GRAY SHALE
17	20	RED CLAY & SHALE	99	102	DRY HARD DARK FLINT ROCK
20	26	LITE COLOR SHALE	102	116	DARK GRAY SHALE
26	29	LITE COLOR LIMESTONE	116	118	RED SHALE
29	32	LITE COLOR SHALE			
32	39	LITE COLOR LIMESTONE			
39	50	DARK GRAY SHALE			
50	52	DARK LIMESTONE			
52	56	LITE COLOR SHALE			
56	68	RED SHALE			
68	71	GRAY SHALE			
71	72	LITE COLOR LIMESTONE			
72	74	B ROKEN LITE COLOR LIMESTONE			

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) 2 / 9 / 91 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 397 This Water Well Record was completed on (mo/day/yr) 2 / 26 / 91 under the business name of CENTRAL KANSAS DRILLING by (signature) Harold D. Martin

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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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