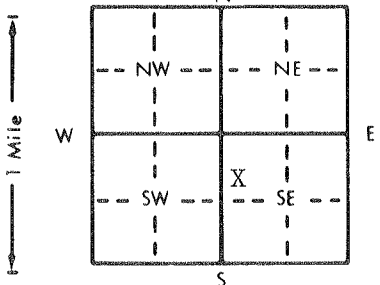


1 LOCATION OF WATER WELL: County: GEARY Fraction: SW 1/4 NW 1/4 SE (LOT 12) Section Number: 27 Township Number: T 12 S Range Number: R 5 EXX

Distance and direction from nearest town or city street address of well if located within city?
 FROM INTERSTATE 70 AND U.S. HWY 77, 3-1/2 MILE SOUTH AND 1/4 MILE WEST

2 WATER WELL OWNER: MARY J. WILLOUGHBY
 RR#, St. Address, Box #: 235 WALKER ST. Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: LENOX MA 01240 Application Number: 5414

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



4 DEPTH OF COMPLETED WELL: 61 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered: 1. 18 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 18 ft. below land surface measured on mo/day/yr 6-12-97
 Pump test data: Well water was 29 ft. after 1 hours pumping 800 gpm
 Est. Yield 1200 gpm: Well water was 41 ft. after 2 hours pumping 1200 gpm
 Bore Hole Diameter: 32 in. to 61 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 X Clamped X
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass _____ Threaded _____

Blank casing diameter: 12 in. to 41 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 24" _____ 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:
 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 41 ft. to 61 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 20 ft. to 61 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 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 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 | 2 | BROWN SILT | | | |
| 2 | 19 | HARD BROWN SILT | | | |
| 19 | 38 | MEDIUM GREY GRAVEL & GREY CLAY | | | |
| 38 | 42 | MEDIUM-LARGE GREY GRAVEL | | | |
| 42 | 61 | MEDIUM-LARGE BROWN GRAVEL & COBBLES | | | |
| | 61 | STOPPED | | | |

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) 6-11-97 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) 6-13-97 under the business name of HOUBLER DRILLING CO. by (signature) *[Signature]*

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.