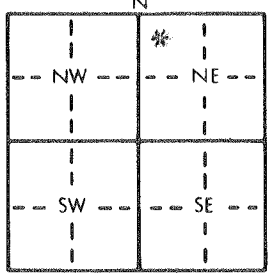


1 LOCATION OF WATER WELL: Fraction NW 1/4 NW 1/4 NE 1/4 Section Number 4 Township Number T 13 S Range Number R 2 E2W  
 County Dickinson

Distance and direction from nearest town or city street address of well if located within city?  
2 miles North of Abilene, Ks on Hwy 15 from Hwy 40

2 WATER WELL OWNER: Richard Danner  
 RR#, St. Address, Box # 501 N. Buckeye 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 94 ft. ELEVATION: .....  
 Depth(s) Groundwater Encountered 1. 57 ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL 46 ft. below land surface measured on mo/day/yr 3 / 27 / 90  
 Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield 5 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Bore Hole Diameter 9 in. to 9 1/4 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.....\*  
 Water Well Disinfected? Yes \* No

5 TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) CASING JOINTS: Glued \* Clamped Welded Threaded  
 Blank casing diameter 5 in. to 9 1/4 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface 14 in., weight 160 lbs./ft. Wall thickness or gauge No. 21 1/4  
 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)  
 SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 11 None (open hole)  
 SCREEN-PERFORATED INTERVALS: From 5 1/4 ft. to 9 1/4 ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 2 1/4 ft. to 9 1/4 ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other  
 Grout Intervals: From 3 ft. to 2 1/4 ft., From ..... ft. to ..... ft.  
 What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)

Direction from well? SOUTH WILL BE How many feet? 200

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	6	BROWN CLAY			
6	15	LITE COLOR CLAY & SHALE			
15	17	LITE COLOR SHALE * Limestone			
17	24	LITE COLOR SHALE			
24	29	RED CLAY & SHALE			
29	34	LITE COLOR SHALE			
34	43	RED CLAY			
43	53	LITE COLOR SHALE			
53	57	LITE GRAY SHALE			
57	59	LIMESTONE			
59	73	B LUE SHALE			
73	78	GRAY SHALE			
78	92	BROWN SHALE			
92	94	GYPSUM & GRAY 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) 3 / 27 / 90 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) 4 / 9 / 90 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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