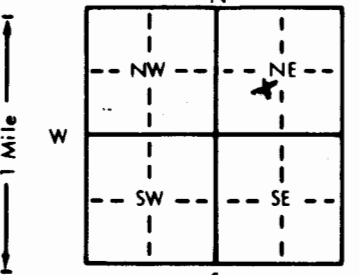


1 LOCATION OF WATER WELL: Fraction NE NE 1/4 SW 1/4 NE 1/4 Section Number 20 Township Number T 13 S Range Number R 2 **(E/W)**

Distance and direction from nearest town or city street address of well if located within city?
1/4 mile south and 1/4 mile east of Washington & First St's, Abilene, Ks.

2 WATER WELL OWNER: Vacu-Blast Corp (Corporate offices- Kenilworth, New Jersey)
 RR#, St. Address, Box # : 600 Washington St. Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Abilene, Ks. Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  DEPTH OF COMPLETED WELL: 52 ft. ELEVATION: 1153.81
 Depth(s) Groundwater Encountered 1. 23 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 23.51 ft. below land surface measured on mo/day/yr 3-6-91
 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 7 5/8 in. to 52 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: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
1 Steel Stainless 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
 2 PVC 4 ABS 7 Fiberglass _____ Threaded
 Blank casing diameter 2 in. to 42 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 18 in., weight _____ lbs./ft. Wall thickness or gauge No. Type 304
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
 1 Steel **3 Stainless steel** 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot **6 Wire wrapped** 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From 52 ft. to 42 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 52 ft. to 39 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 39 ft. to 0 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)
Surface drainage ditch
 Direction from well? 5 How many feet? 20

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Clay - silty, black			
1	3	Clay - silty, sandy, brown			
3	5	Clay - silty, lt. brown			
5	8	Sand - VF, silty, brown			
8	11	Clay - silty, black			MW #34
11	14	Clay - silty, sandy, VF, dk brown to brown			Completed at the surface with an above ground, locking, steel protective cover set in a concrete pad
14	23	Silt- clayey, brown			
23	25	Clay - silty, brown			
25	47	Sand - VF, silty, brown			
47	49	Sand - clayey			
49	51	Sand			
51	54	Shale - weathered			
54		LS weathered 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) 3-6-91 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/yr) 4-22-91 under the business name of GeoCore Services, Inc. by (signature) Dale Pelt

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.