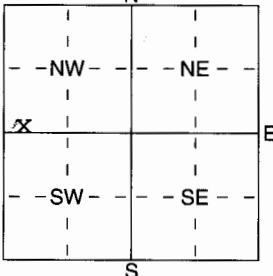


1 LOCATION OF WATER WELL: Fraction SW 1/4 SW 1/4 NW 1/4 Section Number 30 Township Number T 13 S Range Number R 20E E/W  
 County: Douglas

Distance and direction from nearest town or city street address of well if located within city?  
2 1/2 XXXX South of Lawrence ~~XXXXXX~~ Permit # 0098

2 WATER WELL OWNER: Clay ~~ME~~ Meseraull Site: 1062 E 1400 Rd  
 RR#, St. Address, Box # : 1365 N 1250 Rd Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : Lawrence Ks. 66046 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL 143 ft. ELEVATION: ..... ft.  
 Depth(s) Groundwater Encountered 73 ..... ft. 2 ..... ft. 3 ..... ft.  
 WELL'S STATIC WATER LEVEL ..... 73 ..... ft. below land surface measured on mo/day/yr ..... 6-25-04 ..... ft.



Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield ..... 30 ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm  
 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: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped .....  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....  
 2 PVC 4 ABS 7 Fiberglass Threaded .....

Blank casing diameter ..... 5 ..... in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface ..... 24 ..... in., weight ..... 2.82 ..... lbs./ft. Wall thickness or guage No. .258

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) ..... ft.

SCREEN-PERFORATED INTERVALS: From 113 ..... ft. to 143 ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 70 ..... ft. to 143 ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....  
 Grout Intervals: From 0 ..... ft. to 24 ..... ft., From 50 ..... ft. to 70 ..... ft., From ..... ft. to ..... ft.

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

Direction from well? West How many feet? 150'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	top soil	101	143	sandstone <del>XX</del> grey
2	5	clay brown	143		limestone grey
5	13	shale yellow			
13	15	shale grey			
15	17	limestone brown			
17	26	sandstone brown			
26	27	limestone brown			
27	34	sandstone brown			
<del>8</del> 34	41	sandstone grey shaly			
41	77	shale grey			
77	83	shale brown			
83	87	shale grey			
87	92	shale brown			
92	101	shale 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) ..... 6-30-04 ..... 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) ..... 6-30-04 ..... under the business name of Strader Drilling Co., Inc. by (signature) Jim Strader

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.