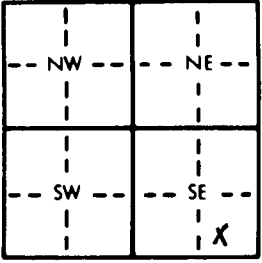


1 LOCATION OF WATER WELL: County: Dickinson Fraction: SE 1/4 SE 1/4 SE 1/4 Section Number: 17 Township Number: T 13 S Range Number: R 4 EW

Distance and direction from nearest town or city street address of well if located within city?
From Chapman 3.5 miles South + 3/4 east

2 WATER WELL OWNER: Jim Clark
 RR#, St. Address, Box #: 1612 South Garfield Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Junction City, KS 66441 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL: 115 ft. ELEVATION: 50 ft. below land surface measured on mo/day/yr

Depth(s) Groundwater Encountered: 1. 64 ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL: 50 ft. below land surface measured on mo/day/yr

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield: 35 gpm Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter: 9 in. to 115 ft., and _____ in. to _____ ft.

WELL WATER TO BE USED AS:

<input checked="" type="checkbox"/> Domestic	<input type="checkbox"/> 3 Feedlot	<input type="checkbox"/> 6 Oil field water supply	<input type="checkbox"/> 9 Dewatering	<input type="checkbox"/> 12 Other (Specify below)
<input type="checkbox"/> 2 Irrigation	<input type="checkbox"/> 4 Industrial	<input type="checkbox"/> 7 Lawn and garden only	<input type="checkbox"/> 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:

<input checked="" type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 RMP (SR)	<input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 9 Other (specify below)	CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped
<input checked="" type="checkbox"/> 2 PVC	<input type="checkbox"/> 4 ABS	<input type="checkbox"/> 7 Fiberglass		<input type="checkbox"/> Welded
				<input type="checkbox"/> Threaded

Blank casing diameter: 5 in. to 9.5 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.

Casing height above land surface: 2' in., weight Sch 40 lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:

<input type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 Stainless steel	<input type="checkbox"/> 5 Fiberglass	<input checked="" type="checkbox"/> 8 RMP (SR)	<input type="checkbox"/> 11 Other (specify)
<input type="checkbox"/> 2 Brass	<input type="checkbox"/> 4 Galvanized steel	<input type="checkbox"/> 6 Concrete tile	<input type="checkbox"/> 9 ABS	<input type="checkbox"/> 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 25/1000

<input type="checkbox"/> 1 Continuous slot	<input checked="" type="checkbox"/> 3 Mill slot	<input type="checkbox"/> 5 Gauzed wrapped	<input type="checkbox"/> 8 Saw cut	<input type="checkbox"/> 11 None (open hole)
<input type="checkbox"/> 2 Louvered shutter	<input type="checkbox"/> 4 Key punched	<input type="checkbox"/> 6 Wire wrapped	<input type="checkbox"/> 9 Drilled holes	
		<input type="checkbox"/> 7 Torch cut	<input type="checkbox"/> 10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From 95 ft. to 115 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 25 ft. to 115 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout intervals: From 0 ft. to 25 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination: None Close

<input type="checkbox"/> 1 Septic tank	<input type="checkbox"/> 4 Lateral lines	<input type="checkbox"/> 7 Pit privy	<input type="checkbox"/> 10 Livestock pens	<input type="checkbox"/> 14 Abandoned water well
<input type="checkbox"/> 2 Sewer lines	<input type="checkbox"/> 5 Cess pool	<input type="checkbox"/> 8 Sewage lagoon	<input type="checkbox"/> 11 Fuel storage	<input type="checkbox"/> 15 Oil well/Gas well
<input type="checkbox"/> 3 Watertight sewer lines	<input type="checkbox"/> 6 Seepage pit	<input type="checkbox"/> 9 Feedyard	<input type="checkbox"/> 12 Fertilizer storage	<input type="checkbox"/> 16 Other (specify below)
			<input type="checkbox"/> 13 Insecticide storage	

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Top soil			
1	4	yellow shale			
4	10	limestone			
10	30	yellow shale			
30	35	limestone			
35	64	brown shale			
64	70	limestone (water)			
70	83	a greenish shale			
83	89	limestone (water)			
89	107	tan shale			
107	115	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) 6/2/97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 451 This Water Well Record was completed on (mo/day/yr) 6/22/97 under the business name of Haldeman Well Drilling by (signature) Wayne Cup