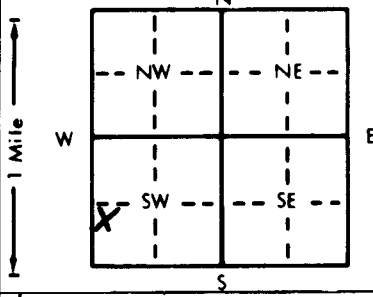


1 LOCATION OF WATER WELL: County: Franklin Fraction: NW 1/4 SW 1/4 SW 1/4 Section Number: 8 Township Number: T 16 S Range Number: R 18 E

Distance and direction from nearest town or city street address of well if located within city? 4.25 miles North of Pomona, Ks

2 WATER WELL OWNER: Dean Wigger
 RR#, St. Address, Box #: 3989 Colorado Rd.
 City, State, ZIP Code: Pomona, Ks. 66076
 Board of Agriculture, Division of Water Resources
 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL: 220 ft. ELEVATION: 220 ft.



Depth(s) Groundwater Encountered 1. 150-220 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 10.5 ft. below land surface measured on mo/day/yr 9-14-95
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 30 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: 8 3/4 in. to 20 in. and 7 7/8 in. to 220 ft.
 WELL WATER TO BE USED AS:
 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 X No _____

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below)
 2 PVC 4 ABS 7 Fiberglass
 CASING JOINTS: Glued X Clamped _____
 Welded _____
 Threaded _____

Blank casing diameter 5 in. to 210 ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.
 Casing height above land surface 30 in., weight 200# lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____
 2 Brass 4 Galvanized steel 6 Concrete tile 7 PVC 10 Asbestos-cement
 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 210 ft. to 220 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 220 ft. to 20 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 20 ft. to 0 ft., From _____ ft. to _____ 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

Direction from well? West How many feet? 150'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	11	Soil + Clay			
11	30	Limestone			
30	37	Coal + Shale			
37	40	Limestone			
40	97	Shale			
97	115	White Sand - Tight			
115	130	Shale			
130	140	White Sand			
140	145	Shale			
145	150	Lime			
150	220	White Sand - Large grained			

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) 9-14-95 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 561 This Water Well Record was completed on (mo/day/yr) 9-19-95 under the business name of EVANS Energy Dev. Inc. 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.