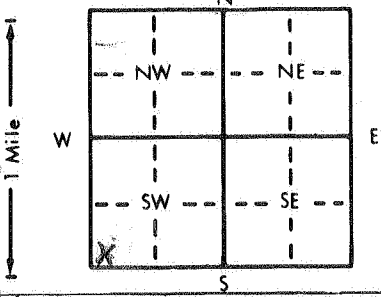


1 LOCATION OF WATER WELL: Fraction SW 1/4 SW 1/4 SW 1/4 Section Number 19 Township Number T 19 S Range Number R 71 EW

Distance and direction from nearest town or city street address of well if located within city?
6 miles 2 SOUTH 4 west of Emporia, Kansas

2 WATER WELL OWNER: JAMES W. MELTON
 RR#, St. Address, Box #: RR 3 BOX 6, EMPORIA, KS. 66801
 City, State, ZIP Code: _____ 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: 80 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 29 ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 25 ft. below land surface measured on mo/day/yr
 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: 8 in. to 8.0 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 Observation 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:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass _____ Threaded _____

Blank casing diameter 5 in. to 8.0 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 12 in., weight _____ lbs./ft. Wall thickness or gauge No. 160

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____
 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 25 ft. to 80 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 25 ft. to 80 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 clay from 25 to 10
 Grout Intervals: From 10-5 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? NORTH west How many feet? 110

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	27	Hole dug well			
27	33	sand & gravel			
33	40	DARK SHALE			
40	42	limo shale			
42	65	DARK SHALE			
65	68	limo			
68	78	SLIGHT SHALE			
78	80	limo			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) completed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 4-8-91 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 512. This Water Well Record was completed on (mo/day/yr) 4-10-91 under the business name of Jeffrey Well Drilling by (signature) Jeffrey

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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.