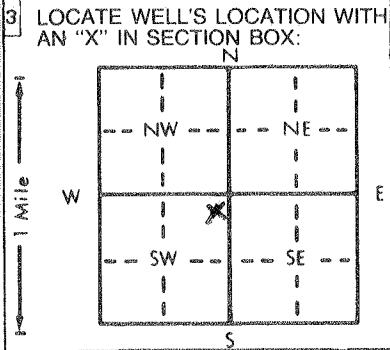


1 LOCATION OF WATER WELL: County: **LYON** Fraction: **NE 1/4 NE 1/4 SW 1/4** Section Number: **7** Township Number: **T 20 S** Range Number: **R 10 EW**
 Distance and direction from nearest town or city street address of well if located within city?
FROM EMPORIA 7 M-W HWY 50 - 6 M-S - CHASE CD LINE

2 WATER WELL OWNER: **ALLEN, HANNA WISE**
 RR#, St. Address, Box #: **GREAT FALLS VIRGINIA**
 City, State, ZIP Code: **11619 ROLLING MEADOW DR. 22006** Board of Agriculture, Division of Water Resources
 Application Number:



4 DEPTH OF COMPLETED WELL: **98** ft. ELEVATION:
 Depth(s) Groundwater Encountered: *** NONE** ft. 2. ft. 3. ft.
 WELL'S STATIC WATER LEVEL: **NA** ft. below land surface measured on mo/day/yr
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield: **0-10** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: **8.62** in. to **98** ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 1 Domestic 3 Feedlot 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Monitoring well 11 Injection well 12 Other (Specify below)
 2 Irrigation 4 Industrial
 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 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) CASING JOINTS: Glued **X** Clamped _____
 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)
 Blank casing diameter: **5** in. to **58** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: **24** in., weight **160** lbs./ft. Wall thickness or gauge No. _____
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole)
 SCREEN-PERFORATED INTERVALS: From **58** ft. to **98** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
SAND
~~GRAVEL~~ PACK INTERVALS: From **10** ft. to **98** 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 **0** ft. to **10** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: **NONE IN AREA**
 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)
 Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	TOP 4 CLAY SILT	93	98	LIME
10	18	LIME	TD	98	* WELL ENHANCEMENT WITH BACK HOE AND SAND PACK FROM WATER SEAPAGE FROM LIME STONE LEDGE & ETC - 7-10' AND POND
18	24	SHALE			
24	30	LIME			
30	36	SHALE			
36	42	LIME			
42	48	SHALE			
48	60	LIME - BROKEN			
60	66	SHALE			
66	71	LIME			
71	73	SHALE			
73	81	LIME			
81	84	SHALE			
84	90	LIME			
90	93	SHALE			

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) **11-30-96** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **479** This Water Well Record was completed on (mo/day/yr) **12-22-96** under the business name of **EBBERTS DRILLING** by (signature) *Aragan Ebberts*

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.