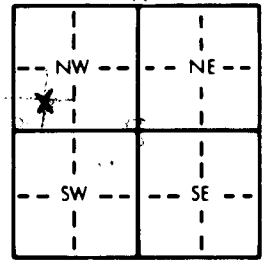


1 LOCATION OF WATER WELL: County: LINN Fraction: SW 1/4 SW 1/4 NW 1/4 Section Number: 8 Township Number: T 21 S Range Number: R 23 Q

Distance and direction from nearest town or city street address of well if located within city? 5.5 miles East & 1.2 North of Centerville, Ks.

2 WATER WELL OWNER: Richard Wilson RR#, St. Address, Box #: Rt. 1 Box 104 City, State, ZIP Code: Centerville, Ks. 66014 Application Number: 1-Heat Pump Hole
Board of Agriculture, Division of Water Resources

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL: 150 ft. ELEVATION: _____ ft.
Depth(s) Groundwater Encountered 1. NONE ft. 2. _____ ft. 3. _____ ft.
WELL'S STATIC WATER LEVEL NONE ft. below land surface measured on mo/day/yr 1-17-00
Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
Est. Yield 0 gpm; Well water was _____ ft. after _____ hours pumping _____ gpm
Bore Hole Diameter: 5/8 in. to _____ 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 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 _____ No X

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) HD Polyethylene Welded Fusion
7 Fiberglass Threaded _____
Blank casing diameter 3/4 in. to 150 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
Casing height above land surface: 18 in., weight SPR 11 lbs./ft. Wall thickness or gauge No. _____
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) _____
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout ③ Bentonite 4 Other _____
Grout Intervals: From 150 ft. to 0 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
What is the nearest source of possible contamination: NONE
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? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	Limestone			
10	18	Shale			
18	20	Limestone	150	0	High Solids Bentonite
20	22	Shale			
22	24	Limestone			
24	27	Shale			
27	31	Limestone			
31	60	Shale			
60	70	Sand Stone			1-Heat Pump Hole
70	150	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) 1-17-00 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 5161 This Water Well Record was completed on (mo/day/yr) 1-17-00 under the business name of Energy Energy Dev. Inc. by signature Scott O. [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.

OFFICE USE ONLY
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EWM
SEC
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