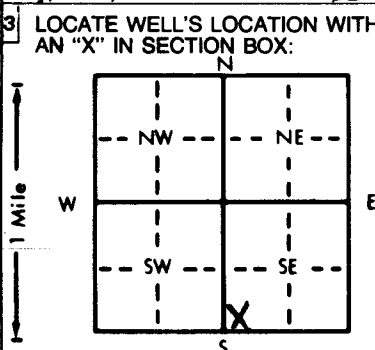


1 LOCATION OF WATER WELL: County: Chase Fraction: SW 1/4 SW 1/4 SE 1/4 Section Number: 26 Township Number: T 21 S Range Number: R 8 E

Distance and direction from nearest town or city street address of well if located within city?
1575 US 9 Dam. well No 1 55 2 E Bazaar Ks.

2 WATER WELL OWNER: Robert K. Lostutter
 RR#, St. Address, Box #: 1611 Sherwood way Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Emporia Ks 66801 Application Number: NA



4 DEPTH OF COMPLETED WELL: 12' ft. ELEVATION: 1350
 Depth(s) Groundwater Encountered 1. 10.5 ft. 2. 10.5-93 ft. 3. 10.5-93 ft.
 WELL'S STATIC WATER LEVEL 10.5 ft. below land surface measured on mo/day/yr 10.5-93
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 1/2 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter 36" in. to 12 ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial
 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)
 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) LEIDSTONE Welded _____
 Blank casing diameter 40 in. to _____ ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.
 Casing height above land surface 36' in., weight _____ lbs./ft. Wall thickness or gauge No. _____
 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) NT
 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) NA
 SCREEN-PERFORATED INTERVALS: From NA ft. to NA ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From _____ ft. to _____ 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
 Grout Intervals: From 12 ft. to 0 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) NONE
 13 Insecticide storage
 Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
		<u>Removed top 4' top rock Filled with clay.</u>			
		<u>TD is not below CONC trench of Dam. At Conservation Pool Level will be 5' under water.</u>			
			<u>12</u>	<u>0</u>	<u>CLAY</u>

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 10-5-93 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 293, This Water Well Record was completed on (mo/day/yr) 11-29-93 under the business name of M. Nee Drilling by (signature) J. Nee

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: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.