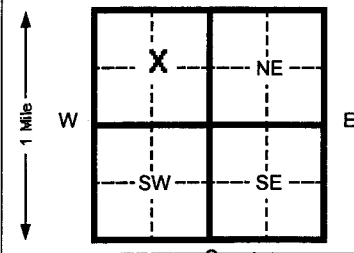


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Harvey	NW ¼ NW ¼ NE ¼	29	T 23 S	R 1 E

Distance and direction from nearest town or city street address of well if located within city?
1420 Old Main Street, Newton

2	WATER WELL OWNER: Hill C Store c/o KDHE	
RR#, St. Address, Box #	: 1000 SW Jackson #410	Board of Agriculture, Division of Water Resources
City, State, ZIP Code	: Topeka, Ks 66612-1367	Application Number:

3	LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF COMPLETED WELL	20	ft.	ELEVATION:	
	Depth(s) Groundwater Encountered		1	15	ft.	2	ft.
	N		WELL'S STATIC WATER LEVEL	4.70	ft. below land surface measured on	mo/day/yr	09/10/03



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 **8.625** In. to **20** ft. and _____ in. to _____ Ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 **Monitoring well** **MW-3**
 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:		5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____	
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded _____	
2 PVC	4 ABS	7 Fiberglass		Threaded	X

Blank casing diameter 2 in. to 5 Ft., Dia _____ In. to _____ ft., Dia _____ in. to _____ ft.
Casing height above land surface **FLUSH** In., weight **SCH 40** Lbs./ft. Wall thickness or gauge No. _____

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

What is the nearest source of possible contamination:			10 Livestock pens	14 Abandoned water well
1 Septic tank	4 Lateral lines	7 Pit privy	11 Fuel storage	15 Oil well/ Gas well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	16 Other (specify below)
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage	Contaminated Site

Direction from well? _____ How many feet? _____

[illegible]

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was
Completed on (mo/day/yr) **10/03/03** And this record is true to the best of my knowledge and belief. Kansas
Water Well Contractor's License No. **585** This Water Well Record was completed on (mo/day/yr) **09/03/03**

Under the business name of **Associated Environmental, Inc.** By (signature) **Darin R Duncan**
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send 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.