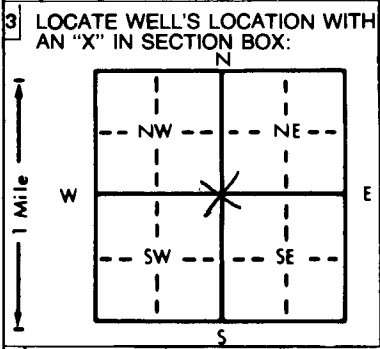


CC

1 LOCATION OF WATER WELL: Fraction NW 1/4 NW 1/4 SE 1/4 Section Number 2 Township Number T 28 S Range Number R 25 **EX**  
 County: Crawford Distance and direction from nearest town or city street address of well if located within city?  
 Well #99-2 @ Oak Grove SLF near Arcadia KS

2 WATER WELL OWNER: Oak Grove SLF 90 Burns & McDonnell  
 RR#, St. Address, Box #: 9400 Ward Parkway Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Kansas City MO 64114 Application Number:



4 DEPTH OF COMPLETED WELL: 32.25 ft. ELEVATION:  
 Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft.  
 WELL'S STATIC WATER LEVEL . . . . . 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: 10 in. to 27.25 ft., and 6 in. to 32.25 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**

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 6 in. to 27.25 ft., Dia. ~~2 1/2~~ in. to +30" - 27.25 ft., Dia . . . . . in. to . . . . . ft.  
 Casing height above land surface 30 in., weight . . . . . lbs./ft. Wall thickness or gauge No. **Sch 40**  
 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 27.25 ft. to 32.25 ft., From . . . . . ft. to . . . . . ft.  
 From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  
 GRAVEL PACK INTERVALS: From ~~26.25~~ ft. to ~~32.25~~ ft., From . . . . . ft. to . . . . . ft.  
 From **26.25** ft. to **33.75** ft., From . . . . . ft. to . . . . . ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout **3** Bentonite 4 Other . . . . .  
 Grout Intervals: From 0 ft. to 27.25 ft., From 0 ft. to 26.25 ft., From 33.75 ft. to 37.25 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)  
 Landfill  
 Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Brown silt some clay			
1	5	Yell-brown clay some silt trace clay			
5	10.5	Yell-brown clay trace gravel & shale			
10.5	12	Yellow orange shale			
12	23.8	Light gray shale			
23.8	24	Black coal			
24	27.3	Light gray shale			
27.3	27.5	Olive gray mudstone			
27.3	37.3	Dark gray 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) 3/25/99 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 570 This Water Well Record was completed on (mo/day/yr) 4/26/99 under the business name of AQUADRILL, INC. by (signature) [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  
T  
R  
EW  
SEC  
1/4  
1/4  
1/4