

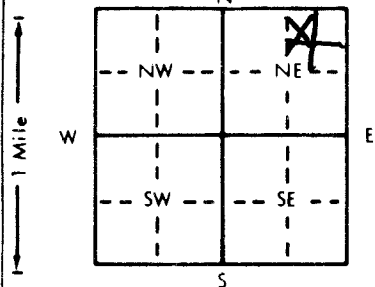
Plugging Report

1 LOCATION OF WATER WELL: Fraction *NW 1/4 NE 1/4 NE 1/4* Section Number *18* Township Number *T 29 S* Range Number *R 1 E*

County: *Subversh* Distance and direction from nearest town or city street address of well if located within city? *8850 & Exposition*

2 WATER WELL OWNER: *Mr Jacobs* RR#, St. Address, Box #: *8850 & Exposition* City, State, ZIP Code: *Haysville Kansas 67060* Board of Agriculture, Division of Water Resources Application Number: *none*

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: *X* in NE section of a 36-section grid. 4 DEPTH OF COMPLETED WELL: *60* ft. ELEVATION: *1300*



Depth(s) Groundwater Encountered: 1. *35* ft. 2. ... ft. 3. ... ft. WELL'S STATIC WATER LEVEL: *35* ft. below land surface measured on *12-17-94* 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: ... in. to ... ft., and ... in. to ... ft. WELL WATER TO BE USED AS: Domestic, Feedlot, Oil field water supply, Dewatering, 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 . If yes, mo/day/yr sample was submitted ... Water Well Disinfected? Yes ... No .

5 TYPE OF BLANK CASING USED: Steel, RMP (SR), Asbestos-Cement, Other (specify below). 2 PVC, ABS, Fiberglass, ... CASING JOINTS: Glued ... Clamped ... Welded ... Threaded . Blank casing diameter: *5* in. to ... ft., Dia. ... in. to ... ft., Dia. ... in. to ... ft. Casing height above land surface: ... in., weight ... lbs./ft. Wall thickness or gauge No. ...

TYPE OF SCREEN OR PERFORATION MATERIAL: Steel, Stainless steel, Fiberglass, RMP (SR), Other (specify). 2 Brass, Galvanized steel, Concrete tile, ABS, None used (open hole). SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot, Mill slot, Wire wrapped, Drilled holes, 2 Louvered shutter, Key punched, Torch cut, Other (specify). 5 Gauzed wrapped, Saw cut, None (open hole). 8 Saw cut, None (open hole).

SCREEN-PERFORATED INTERVALS: 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.

6 GROUT MATERIAL: Neat cement, Cement grout, Bentonite, Other. Grout Intervals: From *20* ft. to *0* ft., From ... ft. to ... ft., From ... ft. to ... ft. What is the nearest source of possible contamination: Septic tank, Lateral lines, Pit privy, Livestock pens, Abandoned water well. 2 Sewer lines, Cess pool, Sewage lagoon, Fuel storage, Oil well/Gas well. 3 Watertight sewer lines, Seepage pit, Feedyard, Fertilizer storage, Other (specify below). 13 Insecticide storage. Direction from well? *South* How many feet? *55*

FROM	TO	PATHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<i>60</i>	<i>20</i>	<i>Sand Fill</i>			
<i>20</i>	<i>0</i>	<i>Cement Grout</i>			

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) *12-17-94* and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. *472* This Water Well Record was completed on (mo/day/yr) *12-17-94* under the business name of *Beardon Pump & Well Serv.* by (signature) *David R. Beardon*

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.