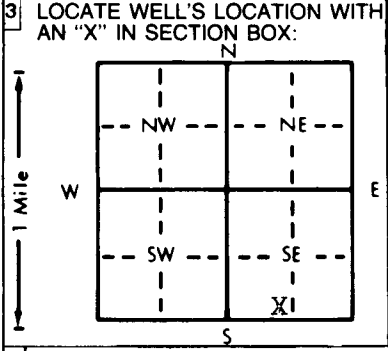


1 LOCATION OF WATER WELL: County: WASHINGTON	Fraction SE 1/4 SW 1/4 SE 1/4	Section Number 17	Township Number T 2 S	Range Number R 3 EW
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Distance and direction from nearest town or city street address of well if located within city?
3 north, 3.5 west of Washington

2 WATER WELL OWNER: **Keesecker Agri-Business, Inc.**
 RR#, St. Address, Box # : **Box 97 Rt. 2** WELL #2 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **Washington, KS 66968** Application Number:



4 DEPTH OF COMPLETED WELL: **145'** ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL **91'** ft. below land surface measured on **10-12-95**
 Pump test data: Well water was **115'-33"** ft. after **9 hrs** hours pumping _____ gpm
 Est. Yield **180** gpm: Well water was **115.95'** ft. after **18 hrs** hours pumping _____ gpm
 Bore Hole Diameter: **18"** 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 sub-
 mitted _____ Water Well Disinfected? Yes **X** No

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued **X** Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing diameter **8"** in. to **0-125'** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **24** in., weight **5.58** lbs./ft. Wall thickness or gauge No. **332**
 TYPE OF SCREEN OR PERFORATION MATERIAL: **JOHNSON** 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:
 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) _____
 SCREEN-PERFORATED INTERVALS: From **125** ft. to **145** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **88** ft. to **145** 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 **7** ft. to **27** ft., From **42** ft. to **56** ft., From **78** ft. to **88** 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)
 13 Insecticide storage _____
 Direction from well? **West** How many feet? **2500'**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Top Soil	86	89	Shale-Red
2	15	Clay-Brown	89	90	Sandstone-Brown
15	17	Clay-Tan	90-92		Shale-Tan
17	18	Fine Sand-Brown	92	145	Sandstone-Brown
18	27	Clay-Brown	145	147	Shale-Grey
27	30	FS-CS-Brown	147	150	Sandstone-Brown
30	41	FS-CS-Med-Pea Gravel-Br			
41	45	Shale-Tan			
45	54	Shale-Grey			
54	57	Shale-Grey-Red			
57	61	Sandstone-Brown			
61	66	Shale-Grey			
66	77	Shale-Red-Grey			
77	83	Shale-Tan-Sandy			
83	86	Shale-Grey-Sandy			

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) **10-12-95** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **182** This Water Well Record was completed on (mo/day/yr) **11-9-95** under the business name of **STRADER DRILLING CO., INC.** by (signature) *Dale Aspren*

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.