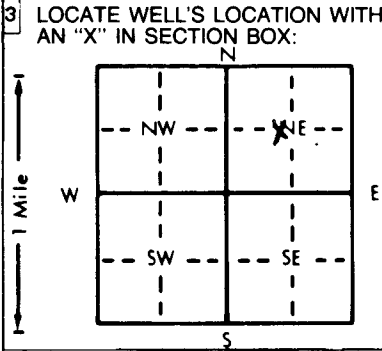


1 LOCATION OF WATER WELL: Fraction NE 1/4 SW 1/4 NE 1/4 Section Number 8 Township Number T 2 S Range Number R 5 EW
 County: Washington

Distance and direction from nearest town or city street address of well if located within city?
Located within city limits of Hanover, KS on west side of town

2 WATER WELL OWNER: Gary and Cheryl Rieth
 RR#, St. Address, Box #: 128 N. Wilbur Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Hanover, KS 66945 Application Number:



4 DEPTH OF COMPLETED WELL: 32' ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. 29' ft. 2. 29' ft. 3. 32' ft.
 WELL'S STATIC WATER LEVEL: 29' ft. below land surface measured on mo/day/yr 09/03/96
 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:
 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 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass
 8 Concrete tile 9 Other (specify below)
 Casing joints: Glued _____ Clamped Welded _____ Threaded _____
 Blank casing diameter: 6 in. to all the way 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:
 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement
 11 Other (specify) _____
 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 2 Mill slot 3 Gauzed wrapped 4 Wire wrapped 5 Saw cut 6 None (open hole)
 7 Louvered shutter 8 Key punched 9 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From 999 ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: 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' ft. to 6' ft., From 30' ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)
 Direction from well? East of well 30' How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
		East of well 30'	0	3'	Top Soil
		clean Disinfected Granular fill	3'	6'	Bentonite Plugging grade plug
			6'	29'	Compacted clay
			29'	32'	clean Disinfected Granular fill

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) 12-10-97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) 03-04-97 under the business name of _____ by (signature) Cheryl L. Rieth

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.