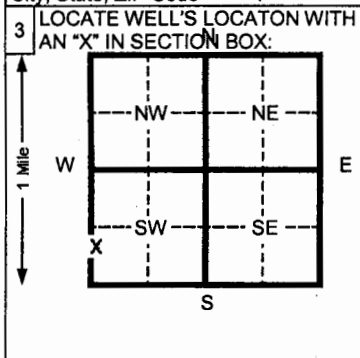


| | | | | |
|---------------------------|-----------------------|----------------|-----------------|----------------------|
| 1 LOCATION OF WATER WELL: | Fraction | Section Number | Township Number | Range Number |
| County: Marshall | NW ¼ SW ¼ SW ¼ | 12 | T 02 S | R 06 W |

Distance and direction from nearest town or city street address of well if located within city?
875 6th Road, Marysville, KS (South of unincorporated town of Herkimer)

2 WATER WELL OWNER: **Southeast Nebraska Cooperative**
 RR#, St. Address, Box #: **403 S. 3rd Street**
 City, State, ZIP Code: **Beatrice, NE 68310**
 Board of Agriculture, Division of Water Resources
 Application Number:



4 DEPTH OF COMPLETED WELL: **29** ft. ELEVATION: **1224.28 (TOC)**
 Depth(s) Groundwater Encountered 1 **26** ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL: **19.9** ft. below land surface measured on mo/day/yr **6-16-05**
 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 **8.5** in. to **30** ft. and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 1 Domestic 3 Feed lot 6 Oil field water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) **10 Monitoring well** 12 Other (Specify below)
 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:
 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) _____ Welded _____
 7 Fiberglass _____ Threaded _____ **Flush**
 Blank casing diameter **2** in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **Flushmount** in., weight **0.703** lbs./ft. Wall thickness or gauge No. **Sch. 40**

TYPE OF SCREEN OR PERFORATION MATERIAL:
 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 **9** ft. to **29** ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **6** ft. to **29** 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 **0.5** ft. to **6** ft. From _____ ft. to _____ ft. From _____ ft. to _____ 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

| FROM | TO | CODE | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|----|------|---|------|----|--------------------|
| 0 | 4 | | Fill - Clay and rock | | | |
| 4 | 16 | | Silty Clay | | | |
| 16 | 19 | | Shale with thin limestone layers | | | |
| 19 | 26 | | Limestone, shaley in part | | | |
| 26 | 30 | | Shale, clay stone | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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/yr) **6-16-05** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **531** This Water Well Record was completed on (mo/day/yr) **7-6-05** under the business name of **Geotechnical Services, Inc.** by (signature) _____

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.