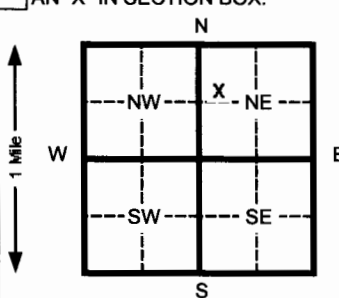


1 LOCATION OF WATER WELL: County: **Montgomery** Fraction: **SW 1/4 NW 1/4 NE 1/4** Section Number: **31** Township Number: **T 32 S** Range Number: **R 16 EW**

Distance and direction from nearest town or city street address of well if located within city?  
**417 E. Main Street, Independence, Kansas**

2 WATER WELL OWNER: **Shanks Oil Company**  
 RR#, St. Address, Box #: **P.O. Box 351** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: **Independence, Kansas 67301** Application Number: \_\_\_\_\_

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  


4 DEPTH OF COMPLETED WELL: **17.0** ft. ELEVATION: \_\_\_\_\_  
 Depth(s) Groundwater Encountered: 1 **11.5** ft. 2 \_\_\_\_\_ ft. 3 \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL: **6.32** ft. below land surface measured on **mo/day/yr**: **05/31/07**  
 Pump test data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Est. Yield: **NA** gpm; Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Bore Hole Diameter: **6.5** in. to **17.0** ft. and \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 WELL WATER TO BE USED AS:  
 5 Public water supply \_\_\_\_\_ 8 Air conditioning \_\_\_\_\_ 11 Injection well \_\_\_\_\_  
 1 Domestic \_\_\_\_\_ 3 Feed lot \_\_\_\_\_ 6 Oil field water supply \_\_\_\_\_ 9 Dewatering \_\_\_\_\_ 12 Other (Specify below) \_\_\_\_\_  
 2 Irrigation \_\_\_\_\_ 4 Industrial \_\_\_\_\_ 7 Lawn and garden (domestic) \_\_\_\_\_ 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:  
 1 Steel \_\_\_\_\_ 3 RMP (SR) \_\_\_\_\_ 5 Wrought Iron \_\_\_\_\_ 8 Concrete tile \_\_\_\_\_ CASING JOINTS: Glued \_\_\_\_\_ Clamped \_\_\_\_\_  
 PVC \_\_\_\_\_ 4 ABS \_\_\_\_\_ 6 Asbestos-Cement \_\_\_\_\_ 9 Other (specify below) \_\_\_\_\_ Welded \_\_\_\_\_  
 7 Fiberglass \_\_\_\_\_ Threaded  \_\_\_\_\_  
 Blank casing diameter: **2.375** in. to **7.0** ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface: **Flush Mount** in., weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No.: **Schedule 40**

TYPE OF SCREEN OR PERFORATION MATERIAL:  
 PVC \_\_\_\_\_ 7 PVC \_\_\_\_\_ 10 Asbestos-cement \_\_\_\_\_  
 1 Steel \_\_\_\_\_ 3 Stainless steel \_\_\_\_\_ 8 RMP (SR) \_\_\_\_\_ 11 Other (specify) \_\_\_\_\_  
 2 Brass \_\_\_\_\_ 4 Galvanized steel \_\_\_\_\_ 9 ABS \_\_\_\_\_ 12 None used (open hole) \_\_\_\_\_  
 SCREEN OR PERFORATION OPENINGS ARE:  
 1 Continuous slot \_\_\_\_\_ 5 Gauzed wrapped \_\_\_\_\_ 8 Saw cut \_\_\_\_\_ 11 None (open hole) \_\_\_\_\_  
 Mill slot \_\_\_\_\_ 6 Wire wrapped \_\_\_\_\_ 9 Drilled holes \_\_\_\_\_  
 2 Louvered shutter \_\_\_\_\_ 4 Key punched \_\_\_\_\_ 7 Torch cut \_\_\_\_\_ 10 Other (specify) \_\_\_\_\_  
 SCREEN-PERFORATED INTERVALS: From **17.0** ft. to **7.0** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 GRAVEL PACK INTERVALS: From **17.0** ft. to **5.0** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL:  
 1 Neat cement \_\_\_\_\_  Cement grout \_\_\_\_\_ 3 Bentonite \_\_\_\_\_ 4 Other \_\_\_\_\_  
 Grout Intervals From **0.0** ft. to **1.0** ft. From **1.0** ft. to **5.0** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank \_\_\_\_\_ 4 Lateral lines \_\_\_\_\_ 7 Pit privy \_\_\_\_\_  Livestock pens \_\_\_\_\_ 14 Abandoned water well \_\_\_\_\_  
 2 Sewer lines \_\_\_\_\_ 5 Cess pool \_\_\_\_\_ 8 Sewage lagoon \_\_\_\_\_  Fuel storage (former) \_\_\_\_\_ 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? **North-northwest** How many feet? **55**

FROM	TO	CODE	LITHOLOGIC LOG
0.0	8.0		<b>Brown-red brown very silty clay, sandy, very firm, moist; slight hydrocarbon odor</b>
8.0	11.5		<b>Brown-red brown very silty clay, sandy, 2-3" limestone stringers, very firm, moist</b>
11.5	17.0		<b>Brown-red brown very silty clay, sandy, plastic, wet</b>

**Flush-mount well completion waiver existent for site.**

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was  constructed,  reconstructed, or  plugged under my jurisdiction and was completed on (mo/day/yr) **05/31/07** and this record is true to the best of my knowledge and belief, Kansas  
 Water Well Contractor's License No. **692** This Water Well Record was completed on (mo/day/yr) **06/04/07**  
 under the business name of **Quad State 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.

OFFICE USE ONLY

T  
R

SEC