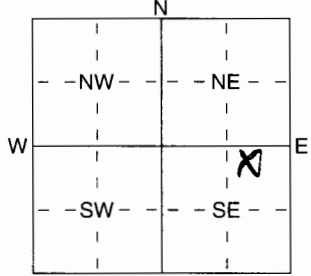


G06.10

1 LOCATION OF WATER WELL: County: **CLAY** Fraction: **NW 1/4 NE 1/4 SE 1/4** Section Number: **32** Township Number: **T 7 S** Range Number: **R 3** (W/W)
 Distance and direction from nearest town or city street address of well if located within city?
1/2 MILE NORTH-OR CLAY CENTER.

2 WATER WELL OWNER: **BEN FOSTER**
 RR#, St. Address, Box #: **2510 8TH** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **CLAY CENTER, KS 66431** Application Number: _____

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

 4 DEPTH OF COMPLETED WELL: **250** ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on 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
 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 Domestic (lawn & garden) 10 Monitoring well **CLOSED L.D.P. G.F.O.T.H.P.A.M.**
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X**; If yes, mo/day/yrs 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 **X**
 7 Fiberglass Threaded _____
 Blank casing diameter **3/4** in. to **250** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **60** in., weight _____ lbs./ft. Wall thickness or gauge No. **SDR 11**
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 10 Asbestos-Cement
 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RMP (SR) 11 Other (Specify) _____
 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) _____ ft.
 SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., 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., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 **Bentonite** 4 Other _____
 Grout Intervals: From **5** ft. to **250** 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 **HOUSE**
 Direction from well? **SOUTH** How many feet? **11**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	19	CLAY			
19	90	SHALE, BROWN			
90	92	LIMESTONE			
92	109	SHALE, BROWN TO RED			1 HOLE TO 250
109	115	LIMESTONE			2 HOLE TO 235
115	185	SHALE, GRAY TO RED			1 HOLE TO 228
185	202	LIMESTONE			
202	250	SHALE, GRAY TO RED			

RECEIVED
 AUG 26 2004

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This ~~well~~ ^{300th well} was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) **6/29/04** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No **585** This Water Well Record was completed on (mo/day/yr) **7/30/04** under the business name of **ASSOCIATED FUNDRAISING MANAGERS, INC.** by (signature) *[Signature]*