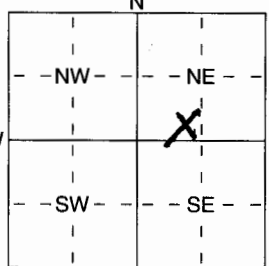


1 LOCATION OF WATER WELL: County: CLAY Fraction: SE 1/4 SW 1/4 NE 1/4 Section Number: 5 Township Number: T 9 S Range Number: R 3 E

Distance and direction from nearest town or city street address of well if located within city?
FROM CLAY CENTER: 5 MILES SOUTH, 1 MILE EAST AND 1/2 MILE NORTH

2 WATER WELL OWNER: JUNIOR CHAREST
 RR#, St. Address, Box #: 1248 OSAGE RD Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: CLAY CENTER, KS 67432 Application Number: _____

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

 4 DEPTH OF COMPLETED WELL: 82 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered: 1 23 ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL: 23 ft. below land surface measured on mo/day/yr: 7/15/04
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield: 60 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 WELL WATER TO BE USED AS:
 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 _____
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes X No _____

5 TYPE OF BLANK CASING USED:
 1 Steel PVC 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____
 2 Brass 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing diameter: 5 in. to 42 ft., Dia 5 in. to 72 ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 24 in., weight _____ lbs./ft. Wall thickness or gauge No. SDR 21
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless Steel 5 Fiberglass PVC 8 RMP (SR) 10 Asbestos-Cement
 2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS 11 Other (Specify) _____
 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 5 Guazed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Mill slot 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) _____ ft.
 SCREEN-PERFORATED INTERVALS: From 42 ft. to 53 ft., From _____ ft. to _____ ft.
 From 72 ft. to 82 ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 25 ft. to 82 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Pentonite 4 Other _____
 Grout intervals: From 3 ft. to 25 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) CREEK
 13 Insecticide storage _____
 Direction from well? NORTH How many feet? 200

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	16	CLAY			
16	27	SHALE, RED			
27	46	LIMESTONE, H2O			
46	82	SHALE, GRAY TO RED TO GRAY			

RECEIVED
 SEP 09 2004
 BUREAU OF WATER

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) 7/15/04 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) 8/24/04 under the business name of ASSOCIATED ENVIRONMENTAL INC by (signature) _____

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.