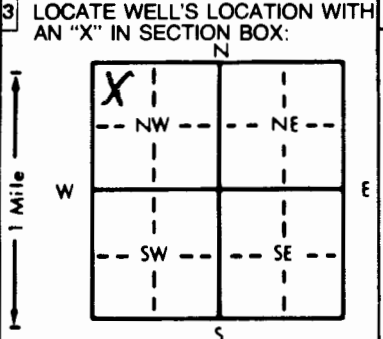


1 LOCATION OF WATER WELL: County: Riley Fraction: NW 1/4 NW 1/4 NW 1/4 Section Number: 28 Township Number: T 9 S Range Number: R 7 E

Distance and direction from nearest town or city street address of well if located within city? From Manhattan 6 1/2 mile North on 113 To MARLIT & Go West 2.5

2 WATER WELL OWNER: Roger Stevens  
 RR#, St. Address, Box #: 4881 Bonnan Drive  
 City, State, ZIP Code: Manhattan, KS 66502  
 Board of Agriculture, Division of Water Resources  
 Application Number:



4 DEPTH OF COMPLETED WELL: 92 ft. ELEVATION: .....  
 Depth(s) Groundwater Encountered 1. 38 ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL 30 ft. below land surface measured on mo/day/yr  
 Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield 1 gpm Well water was ..... ft. after ..... hours pumping ..... gpm  
 Bore Hole Diameter: 9 in. to 9.2 in. to ..... ft. and ..... in. to ..... ft.  
 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 Lawn and garden only 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 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 5 in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface 21 in., weight Sch 40 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 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole)  
 SCREEN-PERFORATED INTERVALS: 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.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other  
 Grout Intervals: From 0 ft. to 2.5 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 What is the nearest source of possible contamination: None Close 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)  
 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

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Top Soil			
1	8	Brown Clay			
8	10	Limestone			
10	24	Brown Shale			
24	26	Limestone			
26	38	Greenish shale			
38	41	Limestone			
41	60	Grey shale			
60	66	Brown Shale			
66	92	Limestone			

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) 9/23/97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 451 This Water Well Record was completed on (mo/day/yr) 10/10/97 under the business name of Haldeman Well Drilling by (signature) Craig Cooper

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.

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