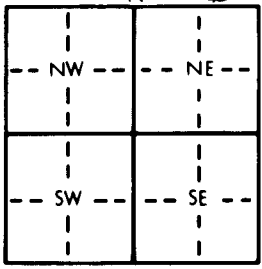


1 LOCATION OF WATER WELL: Fraction 1/4 Lot 19 Section Number 31 Township Number T 9 S Range Number R 8 E/W  
 County: Riley

Distance and direction from nearest town or city street address of well if located within city?  
 From Rocky Ford: 1/2 mi. S - 1 mi. E - 1/4 mi. S.

2 WATER WELL OWNER: Star A., Inc. DBA C.K. Processing Company, Bernard L. Swoyer - Manager  
 RR#, St. Address, Box #: Rt. 5, Box 120 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Manhattan, KS 66502 Application Number: 3000

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL: 66 ft. ELEVATION: .....  
 Depth(s) Groundwater Encountered 1. 27 ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL 27 ft. below land surface measured on mo/day/yr 3-17-84  
 Pump test data: Well water was 39 ft. after 1 hours pumping 1000 gpm  
 Est. Yield 1500 gpm: Well water was 47 ft. after 2 hours pumping 1200 gpm  
 Bore Hole Diameter: 32 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 Observation well  
 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: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ..... Clamped X .....  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....  
 2 PVC 4 ABS 7 Fiberglass ..... Threaded .....  
 Blank casing diameter 16 in. to 50 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface: 12 in., weight ..... lbs./ft. Wall thickness or gauge No. ....  
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement  
 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: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)  
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes  
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....  
 SCREEN-PERFORATED INTERVALS: From 50 ft. to 66 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 10 ft. to 66 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 ft. to 10 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well  
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage NONE

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
1	9	heavy black silt			
9	20	soft brown silt			
20	24	sm.-med. brown gravel			
24	26	md.-lg. brown gravel			
26	28	" " " & gray clay			
28	31	" " " & gray gravel (clear)			
31	36	sm.-meg. gray gravel			
36	38	med. gray gravel			
38	49	med.-lg. green gravel			
49	61	lg. green gravel			
61	66	meg.-lg. green gravel			
	66	lg. rocks STOPPED			

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) 3-15-84 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 323 This Water Well Record was completed on (mo/day/yr) 3-1-84 under the business name of Hoobler Drilling Company by (signature) Stanley H. Hoobler

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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY  
T  
9  
R  
SEC. 31  
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