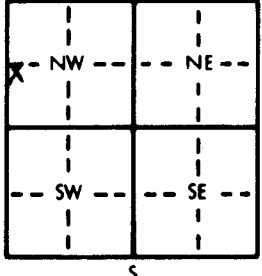


1 LOCATION OF WATER WELL: County: <b>Sheridan</b>		Fraction <b>NW 1/4 SW 1/4 NW 1/4</b>	Section Number <b>34</b>	Township Number <b>T 10 S</b>	Range Number <b>R 30 EW</b>																																																																																																
Distance and direction from nearest town or city street address of well if located within city? <b>3 Miles south of Angelus &amp; 1 South 1/2 mile East</b>																																																																																																					
2 WATER WELL OWNER: <b>David Rueschhoff</b> <b>Murfin Drilling</b> RR#, St. Address, Box #: <b>Rt. 1 Box 4</b> <b>Box 661</b> City, State, ZIP Code: <b>Grinnel, Kansas 67738</b> <b>Colby, Kansas 67701</b> Board of Agriculture, Division of Water Resources Application Number: <b>910253</b>																																																																																																					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"></div>		4 DEPTH OF COMPLETED WELL: <b>180'</b> 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 Bore Hole Diameter: <b>.8"</b> in. to <b>1.80'</b> ft., and ..... in. to ..... ft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 1 Domestic 3 Feedlot 7 Lawn and garden only 10 Monitoring well 2 Irrigation 4 Industrial Was a chemical/bacteriological sample submitted to Department? Yes.....No... <b>X</b> .....; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes No <b>X</b>																																																																																																			
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <b>X</b> Clamped ..... 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded ..... 7 Fiberglass Threaded..... Blank casing diameter ..... <b>4.5"</b> in. to <b>160'</b> ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft. Casing height above land surface: <b>18"</b> in., weight <b>2.38</b> lbs./ft. Wall thickness or gauge No. <b>248</b> TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 7 <b>PVC</b> 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) ..... 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 <b>Saw cut</b> 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) ..... SCREEN-PERFORATED INTERVALS: From <b>160'</b> ft. to <b>180'</b> ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft. GRAVEL PACK INTERVALS: From <b>20'</b> ft. to <b>180'</b> ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft.																																																																																																					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 <b>Bentonite</b> 4 Other ..... Grout intervals: From <b>0</b> ft. to <b>20'</b> ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft. What is the nearest source of possible contamination: <b>NONE</b> 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 Direction from well? How many feet? <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>FROM</th><th>TO</th><th>LITHOLOGIC LOG</th><th>FROM</th><th>TO</th><th>PLUGGING INTERVALS</th></tr></thead><tbody><tr><td>0</td><td>3</td><td>Surface</td><td>143</td><td>150</td><td>Med. sand</td></tr><tr><td>3</td><td>20</td><td>Clay</td><td>150</td><td>159</td><td>Clay &amp; caliche streaks</td></tr><tr><td>20</td><td>41</td><td>Clay sand caliche streaks</td><td>159</td><td>169</td><td>Fine sand</td></tr><tr><td>41</td><td>50</td><td>Fine sand</td><td>169</td><td>175</td><td>Sand &amp; clay streaks</td></tr><tr><td>50</td><td>67</td><td>Clay &amp; caliche streaks</td><td>175</td><td>180</td><td>Ochre - shale</td></tr><tr><td>67</td><td>89</td><td>Fine sand to med. sand</td><td></td><td></td><td></td></tr><tr><td>89</td><td>99</td><td>Clay &amp; caliche streaks</td><td></td><td></td><td></td></tr><tr><td>99</td><td>102</td><td>Med. sand</td><td></td><td></td><td></td></tr><tr><td>102</td><td>106</td><td>Clay sand</td><td></td><td></td><td></td></tr><tr><td>106</td><td>110</td><td>Med. sand</td><td></td><td></td><td></td></tr><tr><td>118</td><td>121</td><td>Med. sand</td><td></td><td></td><td></td></tr><tr><td>121</td><td>127</td><td>Clay sand streaks</td><td></td><td></td><td></td></tr><tr><td>127</td><td>136</td><td>Med. sand</td><td></td><td></td><td></td></tr><tr><td>136</td><td>139</td><td>Sand &amp; caliche</td><td></td><td></td><td></td></tr><tr><td>139</td><td>143</td><td>Caliche</td><td></td><td></td><td></td></tr></tbody></table>						FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	3	Surface	143	150	Med. sand	3	20	Clay	150	159	Clay & caliche streaks	20	41	Clay sand caliche streaks	159	169	Fine sand	41	50	Fine sand	169	175	Sand & clay streaks	50	67	Clay & caliche streaks	175	180	Ochre - shale	67	89	Fine sand to med. sand				89	99	Clay & caliche streaks				99	102	Med. sand				102	106	Clay sand				106	110	Med. sand				118	121	Med. sand				121	127	Clay sand streaks				127	136	Med. sand				136	139	Sand & caliche				139	143	Caliche			
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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) <b>June 20, 1991</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>394</b> This Water Well Record was completed on (mo/day/yr) <b>June 20, 1991</b> under the business name of <b>Woofter Pump &amp; Well</b> by (signature) <i>Walter Woofler</i>																																																																																																					
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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.																																																																																																					