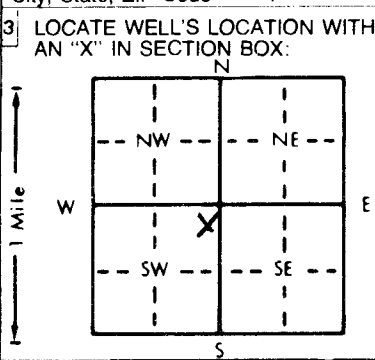


1 LOCATION OF WATER WELL: Fraction NE 1/4 NE 1/4 SW 1/4 Section Number 23 Township Number T 11 S Range Number R 28 **EW**

Distance and direction from nearest town or city street address of well if located within city?
3 Miles South, 1/2 Mile West of Park, Kansas

2 WATER WELL OWNER: Ted Heier Redrill-Battery of 2
 RR#, St. Address, Box #: Park, Ks. 67751 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: _____ Application Number: 22510



4 DEPTH OF COMPLETED WELL: 136 ft. ELEVATION: _____ ft.
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 108 ft. below land surface measured on mo/day/yr _____ ft.
 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: 8 in. to 136 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 X; If yes, mo/day/yr sample was sub-
 mitted _____ 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 X Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing diameter 4.5 in. to 96 ft. Dia. _____ in. to _____ ft. Dia. _____ in. to _____ ft.
 Casing height above land surface 18 in. weight 2.38 lbs./ft. Wall thickness or gauge No. .248
 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) _____
 SCREEN-PERFORATED INTERVALS: From 96 ft. to 136 ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 20 ft. to 136 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 20 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: NONE
 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? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Surface	80	85	Sandy Clay & Caliche
2	17	Loess	85	90	Sandy Clay, Caliche w/some Fine Sand Strks.
17	25	Sandy Clay w/Caliche			
25	34	Tight Med. Sand w/Caliche Strks	90	95.5	Sandy Clay & Caliche
34	40	Cemented Sand w/Clay & Caliche & Some Sand	95.5	100	Med. Sand & Gravel w/Clay St.
40	50	Tight Fine Sand w/Clay Strks.	100	110	Med. Sand & Gravel
50	55	Clay			
55	60	Hard Sandy Clay w/a Few Sand Strks.			
60	62	Loose Fine to Med. Sand	123	132	Sandy Clay & Med. Sand & Gravel Mix.
62	65	Clay, Caliche & Some Tight Sand			
65	70.5	Fine to Med. Sand w/Clay Strks	132	136	Ochra & Hard Red Layers
70.5	73	Clay, Caliche & Some Sand			
73	76	Med. Sand & Gravel w/Clay & Caliche			
76	80	Sandy Clay w/Sand Strks.			

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) 12-30-94 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/yr) 1-9-95 under the business name of Woofter Oump & Well, Inc. by (signature) Jay C. Woofter

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.

OFFICE USE ONLY T R EW SEC 1/4 1/4 1/4