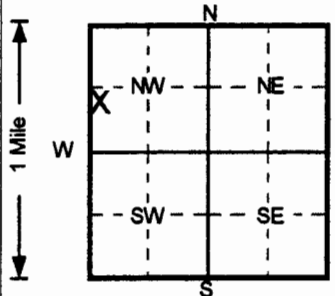


1 LOCATION OF WATER WELL: Fraction NW ¼ SW ¼ NW ¼ Section Number 2 Township Number T 11 S Range Number R 32 **EW**

Distance and direction from nearest town or city street address of well if located within city?  
**Oakley Power Plant, Oakley, Kansas**

2 WATER WELL OWNER: City of Oakley *Oakley Power Plant*  
 RR#, St. Address, Box # : 209 Hudson Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : Oakley, Kansas Application Number:

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


4 DEPTH OF COMPLETED WELL . . . . . 133 . . . . . ft. ELEVATION: . . . . . 999 . . . . .  
 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 . . . . . NA . . . . . ft. after . . . . . hours pumping . . . . . gpm  
 Est. Yield . . . . . NA . . . . . gpm: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm  
 Bore Hole Diameter . . . . . 11 . . . . . in. to . . . . . 155 . . . . . 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: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued . . . . . Clamped . . . . .  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded . . . . .  
**2** PVC 4 ABS 7 Fiberglass . . . . . Threaded.   
 Blank casing diameter . . . . . 4 . . . . . in. to . . . . . 133 . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.  
 Casing height above land surface . . . . . 0 . . . . . in., weight . . . . . Sch 40 . . . . . 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 . . . . . 98 . . . . . ft. to . . . . . 133 . . . . . ft., From . . . . . ft. to . . . . . ft.  
 From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  
 GRAVEL PACK INTERVALS: From . . . . . 91 . . . . . ft. to . . . . . 133 . . . . . 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 . . . . . 69 . . . . . ft., From . . . . . 69 . . . . . ft. to . . . . . 91 . . . . . 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)  
 . . . . . **Former Tank Basin** . . . . .  
 Direction from well? **next to** How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Gravel, Sand, Clay,			
1	9	Clay, Dark Brown			
9	27	Silt, Brown			
27	34	Clay, Brown			
34	45	Sand, Brown			
45	46	Gravel,			
46	62	Clay, Gray Brown			
62	80	Sand, Brown			
80	89	Snad, Brown			
89	100	Clay, Brown			
100	120	Sand, Brown			
120	15	Sand			
					SVE5, Tag #, Flushmount
					Project Name: AG.W - Oakley Power Plant
					GeoCore # 711, #

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) . . . . . 9/16/1998 . . . . . and this record is true to the best of my knowledge and belief.  
 Kansas Water Well Contractor's License No. . . . . 527 . . . . . This Water Well Record was completed on (mo/day/yr) . . . . . 9/28/1998 . . . . .  
 under the business name of **GeoCore Services, Inc.** by (signature) *Paul Wolf*

OFFICE USE ONLY  
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