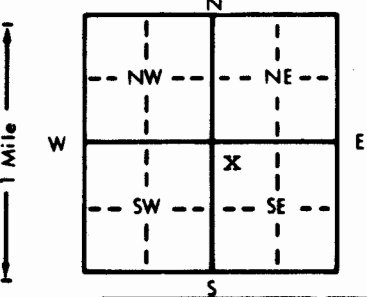


1 LOCATION OF WATER WELL: Fraction NW 1/4 NW 1/4 SE 1/4 Section Number 4 Township Number T 12 S Range Number R 34 **E/W**

Distance and direction from nearest town or city street address of well if located within city?  
 4 south 4 west 1 south 1/2 west 1/2 south of Monument

2 WATER WELL OWNER: Kuhlman Farms Inc. Murfin Drilling Co.  
 RR#, St. Address, Box #: Rt. 2 P.O. Box 661 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Oakley, Kans. 67748 Colby, Ks. 67701 Application Number: T89 368

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



4 DEPTH OF COMPLETED WELL: 225' ft. ELEVATION:

Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft.  
 WELL'S STATIC WATER LEVEL 129 ft. below land surface measured on mo/day/yr 8-12-89  
 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 . . . . . 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. . . . . X. . . . .; If yes, mo/day/yr sample was submitted  
 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 . . . . . in. to 205 . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.  
 Casing height above land surface 4.5 . . . . . 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 8 RMP (SR) 10 Asbestos-cement  
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) . . . . .  
 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 205 . . . . . ft. to 225 . . . . . ft., From . . . . . ft. to . . . . . ft.  
 From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.

GRAVEL PACK INTERVALS: From 20 . . . . . ft. to 225 . . . . . 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: 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) Domestic  
 Direction from well? W How many feet? 2640

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	39	Clay	136	182	Caliche
39	46	Gravel	182	185	Med. Sand
46	52	Clay & Caliche Strks.	185	186	Clay
52	59	Med. Sand	186	192	Med. Sand
59	70	Clay	192	197	Clay
70	76	Caliche	197	215	Med. Sand
76	81	Med. Sand	215	220	Ochre
86	87	Clay			
87	90	Med. Sand			
90	91	Clay			
91	97	Med. Sand			
97	112	Clay			
112	129	Caliche			
129	131	Med. Sand			
131	136	Clay			

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) 8-12-89 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 394 This Water Well Record was completed on (mo/day/yr) 8-14-89 under the business name of Woofter Pump & Well Service by (signature) [Signature]

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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. 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