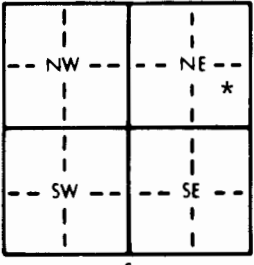


1 LOCATION OF WATER WELL: Fraction SE 1/4 SE 1/4 NE 1/4 Section Number 14 Township Number T 13 S Range Number R 1- E/W
 County: Saline
 Distance and direction from nearest town or city street address of well if located within city?
1/2 mile West of Solomon, Ks & 1/2 mile North

2 WATER WELL OWNER: Chester Shaw
 RR#, St. Address, Box # : 4821 N. Amos Rd. Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Solomon, Ks 67480 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: **4 DEPTH OF COMPLETED WELL:** 60 ft. **ELEVATION:** _____
 Depth(s) Groundwater Encountered 1. none ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr 4 / 12 / 00
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 0 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter 9 in. to 60 in. and _____ in. to _____ in.
 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 test hole
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was sub-
 mitted 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 _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface _____ 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 _____ ft. to _____ ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From _____ ft. to _____ 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 2 ft. to 6 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)
 13 Insecticide storage
 Direction from well? WEST How many feet? 114

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	21	DARK CLAY	0	2	TOP SOIL
21	22	BROWN SANDY CLAY	2	6	BENTONITE SEALER
22	25	YELLOW SHALE & CLAY	6	60	CLAY COMPATED
25	27	LITE GRAY CLAY			
27	28	LITE GRAY SHALE LAYERS			
28	32	BROWN & LITE GRAY SHALE LAYERS			
32	33	FINE BROWN SAND			
33	38	FINE SAND & BROWN SHALE			
38	43	GRAY & TAN SHALE & CLAY			
43	50	GRAY DARK CLAY			
50	60	LITE COLOR SHALE			

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) 4 / 12 / 00 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 397 This Water Well Record was completed on (mo/day/yr) 4 / 17 / 00 under the business name of CENTRAL KANSAS DRILLING by (signature) Harold D. Martin

OFFICE USE ONLY
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R
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SEC.
1/4
1/4
1/4