1 LOCATION OF WATER WELL:

	Fraction					Section Number	Township Number	Range Number
County: Ellis	NE ¼	NW ¼	SW ¼			28	T 13 S	R 18 E/(W)

Distance and direction from nearest town or city street address of well if located within city?

2917 Walnut Hays, Kansas

2 WATER WELL OWNER: Fred Meis

RR#, St. Address, Box # : 2917 Walnut

City, State, ZIP Code : Hays, Kansas 67601

Board of Agriculture, Division of Water Resources

Application Number:

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

```
            N
   |----|----|
   |-- NW --|-- NE --|
 W |    X   |        | E
   |----|----|
   |-- SW --|-- SE --|
   |----|----|
            S
```
(1 Mile scale on left, W—E across)

4 DEPTH OF COMPLETED WELL.....95....... ft. ELEVATION: ....Upland.........

Depth(s) Groundwater Encountered 1...50.........ft. 2................ft. 3................ft.

WELL'S STATIC WATER LEVEL ..46...... ft. below land surface measured on mo/day/yr ..8/22/89........

Pump test data: Well water was .49....... ft. after ..2....... hours pumping .30....... gpm

Est. Yield ..30.... gpm; Well water was .... ft. after .... hours pumping .... gpm

Bore Hole Diameter...10.....in. to ....95.........ft., and................in. to ....ft.

WELL WATER TO BE USED AS: 7 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 X   No

5 TYPE OF BLANK CASING USED: 2

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 ....5.......in. to .....75.....ft., Dia.............in. to ....ft., Dia.............in. to ....ft.

Casing height above land surface..24.............in., weight ....2.29.............lbs./ft. Wall thickness or gauge No. ....,26...........

TYPE OF SCREEN OR PERFORATION MATERIAL: 7

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: 8

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......75.........ft. to .....95........ft., From...........ft. to............ft.

From................ft. to ....ft., From...........ft. to............ft.

GRAVEL PACK INTERVALS: From......20.........ft. to .....95........ft., From...........ft. to............ft.

From............ft. to ....ft., From...........ft. to............ft.

6 GROUT MATERIAL: 1

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	3	Topsoil			
3	50	Clay			
50	58	Gravel			
58	70	Sandy clay			
70	90	Sand and rock Layers			
90	95	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) ....8/25/89................................ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ....199...... This Water Well Record was completed on (mo/day/yr) .8/25/89...............

under the business name of Karst Water Well Drilling & Service, Inc by (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.