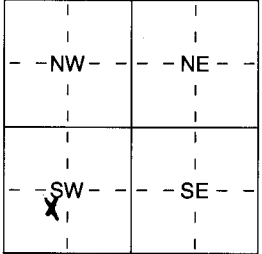


1 LOCATION OF WATER WELL: Fraction SE SW NW SE Section Number 20 Township Number T 12 13 S Range Number R 18
 County: ELLIS

Distance and direction from nearest town or city street address of well if located within city?
1405 W 44TH HAYS KS

2 WATER WELL OWNER: LONNIE BURGER
 RR#, St. Address, Box # : 1405 W 44TH Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : HAYS KS 67601 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL 70 ft. ELEVATION: _____ ft.
 Depth(s) Groundwater Encountered 1 5.5 ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL 5.5 ft. below land surface measured on mo/day/yr 5-2-05
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 8 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 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 X Domestic (lawn & garden) 10 Monitoring well _____
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No XX; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes _____ No XX

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued XX Clamped _____
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
X PVC 4 ABS 7 Fiberglass _____ Threaded _____
 Blank casing diameter 5 in. to 5.0 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 1.8 in., weight 1.60 lbs./ft. Wall thickness or gauge No. _____
 TYPE OF SCREEN OR PERFORATION MATERIAL: X 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 X Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____ ft.
 SCREEN-PERFORATED INTERVALS: From 5.0 ft. to 7.0 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 40 ft. to 70 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout X Bentonite 4 Other _____
 Grout Intervals: From 0 ft. to 3.0 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage _____
 Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	SURFACE CLAY			
10	30	HARD YELLOW CLAY			
30	40	FINE SAND			
40	55	HARD YELLOW CLAY			
55	65	MED SAND			
65	70	BLUE SHALE			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was X constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 5-2-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 444 This Water Well Record was completed on (mo/day/yr) 5-2-05 under the business name of ANDY ANDERSON DRILING by (signature) Andy Anderson

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.