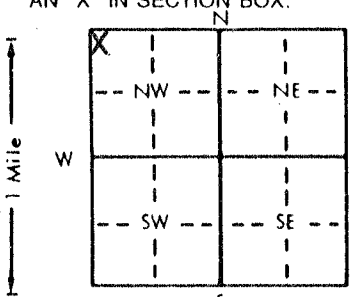


1 LOCATION OF WATER WELL: County: Ellis Fraction NW 1/4 NW 1/4 SW 1/4 Section Number 3 Township Number T 14 S Range Number R 18 E

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

2 WATER WELL OWNER: Duane M. Creamer
 RR#, St. Address, Box #: 703 Vine 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: 28 ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. 25 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 15.07 ft. below land surface measured on 08-16-93 mo/day/yr
 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:
 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:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded
 Blank casing diameter _____ in. to _____ in. Dia _____ 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:
 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:
 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 _____ ft. to _____ ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From _____ ft. to _____ ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From _____ ft. to _____ 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? northwest How many feet? 320

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	4"	ASPHALT			
4"	2'	MD TO DK BRN CLY TO SL SLTY, TR CALC., -SND-GRV SIZE, DAMP			Flush Cover
2	5	LT TO DK BRN CLY, SL TO MOD SLTY, DAMP			ID # 00072425
5	10	MD TO DK BRN CLY, MD TO V SLTY, DAMP			MW9
10	15	LT TO BRN TO LT GRV CLY, V SLTY, TR F SND, DAMP			
15	20	MD TO DK BRN CLY, MD SLTY, DAMP			
20	25	DK BRN CLY, SL SLTY, MOIST			
25	28	DK BRN CLY, MOD SLTY SAT.			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 08-10-93 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/year) 08-17-93 under the business name of GeoCore Services, Inc. by (signature) Doug Ray

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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.