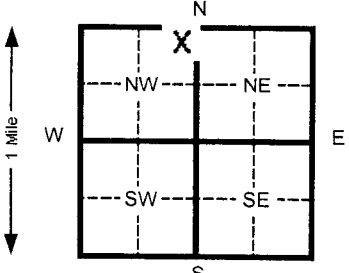


1 LOCATION OF WATER WELL:		Fraction	Section Number		Township Number		Range Number		
County: Saline		NW ¼ NW ¼ NE ¼	15		T 14 S		R 03 W		
Distance and direction from nearest town or city street address of well if located within city? 2137 W. Old Hwy 40									
2 WATER WELL OWNER:		KANEB PIPELINE							
RR#, St. Address, Box # :		3300 E. AVENUE G							
City, State, ZIP Code :		HUTCHINSON, KS 67501							
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		Board of Agriculture, Division of Water Resources Application Number:							
		4 DEPTH OF COMPLETED WELL 17 ft. ELEVATION: Depth(s) Groundwater Encountered 1 12 ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on 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 8.5 in. to 17 ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 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 _____ Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) _____ Welded _____ Blank casing diameter 2 in. to 7 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface ~30 in., weight 0.703 lbs./ft. Wall thickness or gauge No. SCH. 40 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) _____ 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 7 Torch cut 9 Drilled holes 10 Other (specify) _____ SCREEN-PERFORATED INTERVALS: From 7 ft. to 17 ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 6 ft. to 17 ft. From _____ ft. to _____ ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grout Intervals From 0.5 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) _____ Direction from well? _____ How many feet? _____									
FROM		TO		CODE		LITHOLOGIC LOG		FROM TO PLUGGING INTERVALS	
0		17				Clay high plasticity, silty, becoming sandy @ 12'.			
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/yr) 5-27-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 6-21-04 under the business name of GEOTECHNICAL SERVICES, INC. by (signature) _____									
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									