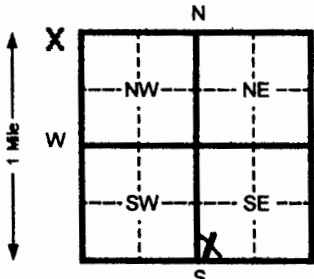


1 LOCATION OF WATER WELL: County: <b>Wichita</b>	Fraction <b>SW 1/4 SW 1/4 SE 1/4</b>	Section Number <b>17</b>	Township Number <b>T 16 S</b>	Range Number <b>R 35 EW</b>
---	--------------------------------------	--------------------------	-------------------------------	-----------------------------

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

2 WATER WELL OWNER: <b>Wilbur Koehn</b> RR#, St. Address, Box # : <b>RR 1, Box 95</b> City, State, ZIP Code : <b>Marienthal, Ks 67863</b>	Board of Agriculture, Division of Water Resources Application Number:
---	--

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL <b>170</b> ft. ELEVATION: Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL <b>150</b> 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 <b>8</b> in. to <b>175</b> 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 <b>X</b> If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes <b>X</b> No
--	---

5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <b>X</b> Clamped 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded 7 Fiberglass Threaded Blank casing diameter <b>4.5</b> in. to <b>130</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface <b>18</b> in., weight <b>2.38</b> lbs./ft. Wall thickness or gauge No. <b>.248</b> 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 7 Torch cut 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 10 Other (specify) SCREEN-PERFORATED INTERVALS: From <b>130</b> ft. to <b>170</b> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From <b>20</b> ft. to <b>170</b> 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 <b>0</b> ft. to <b>20</b> 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 <b>none</b>
---

Direction from well?		How many feet?				
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2		Surface			Strks
2	15		Loess	135	150	Fine to med sd w/clay & caliche strks
15	30		Clay w/caliche strks	150	165	Med sd w/clay Lenses
30	32		Clay w/caliche strks	165	170	Med sand w/clay lenses
32	40		Med sd w/clay & caliche strks	170	175	Yellow ochre
40	45		Clay w/caliche strks			
45	60		Clay w/caliche strks & sand strk			
60	75		Clay w/caliche strks & sand strk			
75	90		Clay w/caliche strks & sand strk			
90	100		Clay w/caliche strks & sd strks			
100	105		Med sand w/clay lenses			
105	120		Fine to med sd w/clay & caliche strks			
120	135		Fine to med sd w/clay & caliche			

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) <b>8-17-06</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>554</b> This Water Well Record was completed on (mo/day/yr) <b>9-12-06</b> under the business name of <b>Woofor Pump &amp; Well Inc.</b> by (signature) <i>Don C. Woofor</i>
--

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-298-5545. Send one to WATER WELL OWNER and retain one for your records.