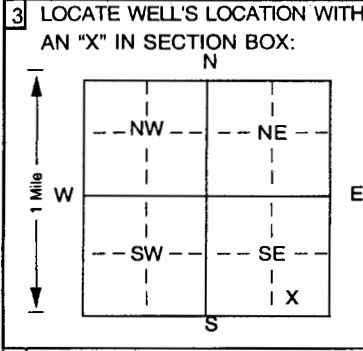


1 LOCATION OF WATER WELL: Fraction SW 1/4 SE 1/4 SE 1/4 Section Number 10 Township Number T 17 S Range Number R 14 E (W)

Distance and direction from nearest town or city street address of well if located within city?
 Approximately 3 1/2 miles west and 4 miles north of Hoisington

2 WATER WELL OWNER: John Ninemire
 RR#, St. Address, Box # : 2713 R Rd. Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Hill City, KS 67642 Application Number:



4 DEPTH OF COMPLETED WELL 222 ft. ELEVATION: unknown
 Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL 124 ft. below land surface measured on mo/day/yr 1-3-05
 Pump test data: Well water was not checked ft. after _____ hours pumping _____ gpm
 Est. Yield unknown gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter 7 7/8 in. to 225 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 Domestic (lawn & garden) 10 Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No If yes, mo/day/yr sample was sub-
 mitted _____ 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 10 Asbestos-cement Threaded
 Blank casing diameter 4 1/2 in. to 160 ft., Dia 4 1/2 in. to 180 ft., Dia _____ in. to _____ ft.
 Casing height above land surface 24 in., weight 2.38 lbs./ft. Wall thickness or gauge No 248
 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)
 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) _____ ft.
 SCREEN-PERFORATED INTERVALS: From 160 ft. to 170 ft., From _____ ft. to _____ ft.
 From 180 ft. to 220 ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 24 ft. to 135 ft., From _____ ft. to _____ ft.
 From 150 ft. to 225 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Bentonite Holeplug
 Grout Intervals: From 0 ft. to 4 ft., From 4 ft. to 24 ft., From 135 ft. to 150 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? West How many feet? 45

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Topsoil	119	121	Clay, gray
2	7	Limestone, hard	121	130	Clay, white and gray with sandstone streaks
7	25	Clay, white, yellow with limestone streak, hard	130	142	Clay, white, gray
25	30	Clay, dark gray	142	144	Clay, white, thin sandstone streak
30	33	Clay, light gray	144	147	Clay, white, gray
33	50	Shale, black	147	159	Clay, white, red
50	79	Shale, black with limestone streaks and thin clay streaks	159	172	Sandstone with clay streaks
			172	179	Clay, white, gray
79	85	Clay, dark gray	179	183	Clay, white with sandstone streaks
85	90	Clay, dark gray with thin sandstone streaks	183	225	Sandstone with clay streaks
90	101	Clay, dark gray			
101	106	Clay, dark gray with sandstone streaks			
106	115	Clay, dark gray			
115	119	Clay, white with sandstone streaks			

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) 1-3-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/yr) 1-6-05 under the business name of Clarke Well & Equipment, Inc. by signature [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, Topeka, Kansas 66620-0001. Telephone 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.