

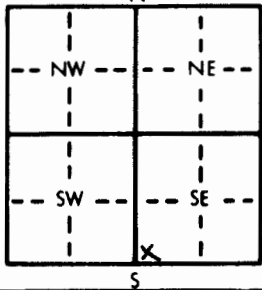
1 LOCATION OF WATER WELL: Fraction SW 1/4 SW 1/4 SE 1/4 Section Number 34 Township Number T 17 S Range Number R 37 **EW**

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

3 miles North 1 1/2 miles West of Leoti, Kansas

2 WATER WELL OWNER: Joe Bauck  
 RR#, St. Address, Box #: 1008 Broadway Plaza Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Leoti, Kansas 67861 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL... 165 ft. ELEVATION: .....  
 Depth(s) Groundwater Encountered 1. 132 ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL ... 132 ft. below land surface measured on mo/day/yr 3/3/82  
 NA 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... 9 in. to 165 ft., and ..... in. to ..... ft.  
 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 7 Lawn and garden only 10 Observation well  
 Was a chemical/bacteriological sample submitted to Department? Yes.....No...X.....; If yes, mo/day/yr sample was submitted  
 Water Well Disinfected? Yes X No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS Glued ..... Clamped .....  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....  
2 PVC 4 ABS 7 Fiberglass ..... Threaded .....

Blank casing diameter ..... 5 in. to 145 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface ..... 12 in., weight 2.368 lbs./ft. Wall thickness or gauge No. 214

TYPE OF SCREEN OR PERFORATION MATERIAL: 7 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 3 Mill slot 6 Wire wrapped 9 Drilled holes  
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....

SCREEN-PERFORATED INTERVALS: From 145 ft. to 165 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 130 ft. to 165 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 Drill Cuttings  
 Grout Intervals: From 15 ft. to 130 ft., From 4 ft. to 15 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? South How many feet? 300

| FROM | TO  | LITHOLOGIC LOG         | FROM | TO  | LITHOLOGIC LOG |
|------|-----|------------------------|------|-----|----------------|
| 0    | 21  | Clay                   | 21   | 51  | Gyp            |
| 51   | 58  | Clay                   | 58   | 85  | Sand           |
| 85   | 133 | Fine sand clay streaks | 133  | 140 | Sand           |
| 140  | 161 | Sand fine to medium    | 161  | 165 | Yellow clay    |

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) 3/4/82 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 232 This Water Well Record was completed on (mo/day/yr) 3/10/82 under the business name of Weishaar Drilling & Supply 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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T 17 R 37 EW SEC. 34 SW 1/4 SW 1/4 SE 1/4