1 LOCATION OF WATER WELL:	Fraction:	Section Number:	Township Number:	Range Number:
County: Barton	SW 1/4 SE 1/4 NE 1/4	5	18	13 West

Distance and direction from the nearest town, or city street address of well, if in city?

2 WATER WELL OWNER: Skokaut's 66 Service, Inc.
Address, Box #: 251 W. Second Street
City, State, Zip Code: Hoisington, KS. 67544

WELL ID: MW1
Board of Agriculture, Division of Water Resources Application Number:

3 LOCATE WELL WITH AN "X"

X

4 DEPTH WELL COMPLETED: 27 ft. ELEVATION: (TOC)

Depth(s) Groundwater Encountered: 22

WELL'S STATIC WATER LEVEL: _____ feet below land surface measured on month/day/year _____

Pump test data: all water was _____ feet after _____ hours _____ gpm

Est. Yield _____ Well water was _____ feet after _____ hours _____ gpm

Bore Diam. _____ inches to _____ feet, and _____ hours _____ feet

WELL WATER TO BE USED AS: 1 domestic 2 irrigation 3 feedlot 4 industrial 5 PWS 6 oil field 7 lawn/garden 8 air condition 9 dewatering 10 monitoring well 11 injection 12 other (specify)

Was a chemical / bacteriological sample submitted Department? yes _____ no X

If yes, month/day/year sample was submitted _____ Well Disinfected? yes _____ no X

5 TYPE OF BLANK CASING: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other

CASING JOINTS: Glued _____ Welded _____ Clamped _____ Threaded X

Blank casing diameter 2 inches to 17 feet, Diam. _____ inches to _____ feet

Casing height above land surface 0 inches, weight _____ lbs./feet Wall thickness or gauge No. 40

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 10 Asbestos-cement 11 Other (specify)

SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 3 Mill Slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole)

SCREEN INTERVALS: from: 17 feet to 27 feet from: _____ feet to _____ feet
from: _____ feet to _____ feet from: _____ feet to _____ feet

GRAVEL PACK INTERVALS: from: 16 feet to 30 feet from: _____ feet to _____ feet
from: _____ feet to _____ feet from: _____ feet to _____ feet

6 GROUT MATERIAL: 1 Neat cement _____ 2 Cement grout X 3 Bentonite X

Grout Intervals: from 0 feet to 14 feet, from 14 feet to 16 feet

What is the nearest source of possible contamination:

Septic tank (1)		Seepage pit (6)		Fuel storage (11)	X
Sewer lines (2)		Pit privy (7)		Fertilizer storage (12)	
Watertight sewer lines (3)		Sewage lagoon (8)		Insecticide storage (13)	
lateral lines (4)		Feedyard (9)		Abandoned water well (14)	
Cess pool (5)		Livestock pens (10)		Oil/Gas well (15)	
				Other (specifty) (16)	

Direction from well? west How many feet (approximate)? 5

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	10	Clay, black, strong petroleum odor			
10	16	Clay, silt, gray to light brown, medium plasticity, moist			
16	30	Clay, fine sand, silt, orange brown, medium plasticity, moist,			
		sand content increases at 21.5', wet at 22'			

WELL ID: MW1
WELL TAG: 00138981
VARIANCE BY: D. Taylor

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was : 1)constructed, 2)reconstructed, or 3)plugged under my jurisdication and was completed on (mth/day/yr) 8/30/95 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License Number 527. This Water Well Record was completed on (mo/dy/yr) 9/19/95 under the business name: Geocore Services, 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 Depart. of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: (913) 296-5545. Send one to Well Owner and retain one for your records.