

1 LOCATION OF WATER WELL: Fraction C 1/4 NW 1/4 SE 1/4 Section Number 6 Township Number T 18 S Range Number R 31 E/W
 County: Scott
 Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: Wabash Energy
 RR#, St. Address, Box #: Box 594
 City, State, ZIP Code: Lawrenceville, IL 62439
 Board of Agriculture, Division of Water Resources
 Application Number: 980139

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

4 DEPTH OF COMPLETED WELL: 16.3 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 111 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 in. to 16.3 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 Lawn and garden only _____ 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 X Clamped _____
 2 PVC _____ 4 ABS _____ 6 Asbestos-Cement _____ 9 Other (specify below) _____ Welded _____
 7 Fiberglass _____ Threaded _____
 Blank casing diameter 4.5 in. to 12.3 ft., Dia _____ in. to _____ ft., Dia _____ in. to 2.48 ft.
 Casing height above land surface 18 in., weight 2.38 lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel _____ 3 Stainless steel _____ 5 Fiberglass _____ 8 PVC _____ 10 Asbestos-cement _____
 2 Brass _____ 4 Galvanized steel _____ 6 Concrete tile _____ 9 ABS _____ 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) _____

SCREEN-PERFORATED INTERVALS: From 123 ft. to 163 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 20 ft. to 163 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 0 ft. to 20 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 _____
 Direction from well? South How many feet? 75'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Surface	120	147	Med sand & gravel w/ clay lenses
2	16	Loess	147	154	Sandy clay
16	20		154	163	Fine to med sand w/ clay stks
20	32	Sandy clay & caliche	163	167	Okra & shale
32	40	Caliche & sandy clay w/ sand stks			
40	52	Caliche & sand stks			
52	58	Fine to med sand			
58	61	Cemented sand Hard			
61	67	Med sand w/ sandstone stks			
67	68	Sandstone hard			
68	87	Fine to med sand w/ sandstone stk			
87	101	Caliche, cemented sand w/ some sand			
101	105	Cemented sand hard			
105	118	Med sand loose			
118	120	Med sand w/ cemented sand stks			

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) 6-26-98 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/yr) 6-29-98 under the business name of Wooten Pumps Well, Inc by (signature) Jay G. Wooten

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: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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