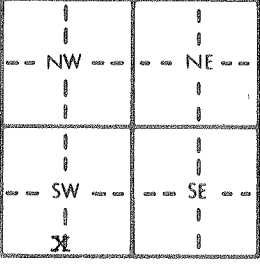


1 LOCATION OF WATER WELL: County: Scott Fraction: SE 1/4 SW 1/4 SW 1/4 Section Number: 14 Township Number: T 18 S Range Number: R 31 E(W)

Distance and direction from nearest town or city street address of well if located within city?
SW corner of Grigston, Ks.

2 WATER WELL OWNER: Anthony Ivey
 RR#, St. Address, Box #: Rt.#1, Box 144 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Grigston-Scott City, Ks. 67871 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  DEPTH OF COMPLETED WELL: 124 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 77 ft. below land surface measured on mo/day/yr 5-8-90
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield: 30 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: 10 in. to 124 ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 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 ; If yes, mo/day/yr sample was submitted _____
 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 _____
 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass _____ Threaded _____
 Blank casing diameter: 5 in. to 124 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight _____ lbs./ft. Wall thickness or gauge No. 200 psi
 TYPE OF SCREEN OR PERFORATION MATERIAL: 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 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 104 ft. to 124 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 25 ft. to 94 ft., From _____ ft. to _____ ft.
 From 104 ft. to 124 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement Cement grout Bentonite 4 Other _____
 Grout Intervals: From 5 ft. to 25 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 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? _____ How many feet? 100

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	fill			
1	21	brown clay			
21	41	brown clay & gypsum			
41	92	fine sand & clay streaks			
92	101	brown clay & gypsum			
101	109	fine & coarse sand			
109	114	brown clay			
114	121	fine sand			
121	124	yellow shale			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 5-8-90 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 449 This Water Well Record was completed on (mo/day/yr) 5-17-90 under the business name of Midwest Well & Pump by (signature) Arthur Buhlman

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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.