

|                                                                                                                                                                                                                                                                                                                                                  |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------|--------------------------------------------------------------------------------------|------------------|--|-----------------|--|--------------|--|--------------------|--|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                        |  | Fraction             |                                                                                      | Section Number   |  | Township Number |  | Range Number |  |                    |  |
| County: <b>Barton</b>                                                                                                                                                                                                                                                                                                                            |  | NE 1/4 NW 1/4 NW 1/4 |                                                                                      | 34               |  | T 19 S          |  | R 13 EW      |  |                    |  |
| Distance and direction from nearest town or city street address of well if located within city?                                                                                                                                                                                                                                                  |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| 1107 East 10th Street, Great Bend, Kansas 67530                                                                                                                                                                                                                                                                                                  |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| 2 WATER WELL OWNER: Shirley M. Luther                                                                                                                                                                                                                                                                                                            |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| RR#, St. Address, Box #: RR 4                                                                                                                                                                                                                                                                                                                    |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| City, State, ZIP Code: Great Bend, Kansas 67530                                                                                                                                                                                                                                                                                                  |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| Board of Agriculture, Division of Water Resources                                                                                                                                                                                                                                                                                                |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| Application Number:                                                                                                                                                                                                                                                                                                                              |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                             |  |                      | 4 DEPTH OF COMPLETED WELL: 30 ft. ELEVATION:                                         |                  |  |                 |  |              |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                  |  |                      | Depth(s) Groundwater Encountered 1. 11 ft. 2. ft. 3. ft.                             |                  |  |                 |  |              |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                  |  |                      | WELL'S STATIC WATER LEVEL 8.05 ft. below land surface measured on mo/day/yr 03-30-93 |                  |  |                 |  |              |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                  |  |                      | 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 10 in. to 30 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 Monitoring well                  |                  |  |                 |  |              |  |                    |  |
| Was a chemical/bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted                                                                                                                                                                                                 |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| Water Well Disinfected? Yes No <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                               |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| 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 Threaded <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                        |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| Blank casing diameter 4 in. to 7 ft. Dia 4 in. to 27-30 ft. Dia in. to ft.                                                                                                                                                                                                                                                                       |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| Casing height above land surface -3 in. weight lbs. ft. Wall thickness or gauge No. Sch. 40                                                                                                                                                                                                                                                      |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                          |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 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 7 ft. to 27 ft. From ft. to ft.                                                                                                                                                                                                                                                                                |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| From ft. to ft. From ft. to ft.                                                                                                                                                                                                                                                                                                                  |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| GRAVEL PACK INTERVALS: From 6 ft. to 30 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 3 ft. From 3 ft. to 6 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? northwest How many feet? 130                                                                                                                                                                                                                                                                                                |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| FROM                                                                                                                                                                                                                                                                                                                                             |  | TO                   |                                                                                      | LITHOLOGIC LOG   |  | FROM            |  | TO           |  | PLUGGING INTERVALS |  |
| 0                                                                                                                                                                                                                                                                                                                                                |  | 4"                   |                                                                                      | GRVL (FILL)      |  |                 |  |              |  |                    |  |
| 4"                                                                                                                                                                                                                                                                                                                                               |  | 5'                   |                                                                                      | BRN SLTY CLY     |  |                 |  |              |  |                    |  |
| 5'                                                                                                                                                                                                                                                                                                                                               |  | 30'                  |                                                                                      | F-C SMD/F-M GRVL |  |                 |  |              |  | PW                 |  |
| 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 yr) 03-11-93 and this record is true to the best of my knowledge and belief. Kansas                                                                                       |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| Water Well Contractor's License No 527 This Water Well Record was completed on (mo day yr) 04-13-93                                                                                                                                                                                                                                              |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| under the business name of GeoCore Services, Inc. by (signature) Dale R. R.                                                                                                                                                                                                                                                                      |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |
| INSTRUCTIONS: This form is to be filled out by the owner of the well. 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: (316) 236-5545. Send one to WATER WELL OWNER and retain one for your records. |  |                      |                                                                                      |                  |  |                 |  |              |  |                    |  |