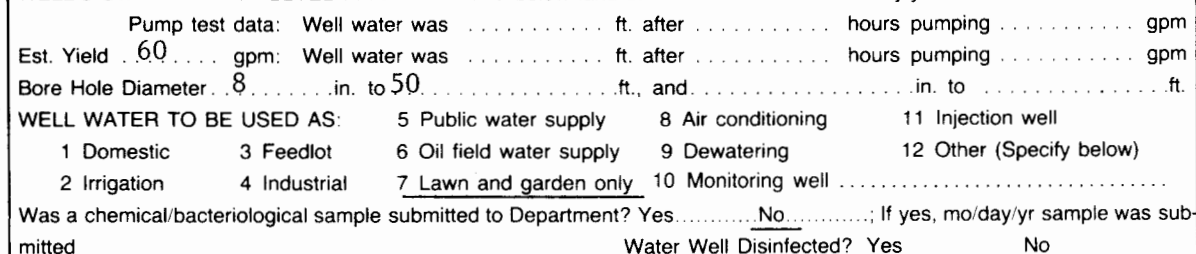


1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County:	Barton	C 1/4 NW 1/4 1/4	34	T 19 S	R 13W E/W

2	WATER WELL OWNER: Charles Musser	
	RR#, St. Address, Box # : 312 Firethorn	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code : Great Bend, Kansas 67530	Application Number:

WELL'S STATIC WATER LEVEL 9 ft. below land surface measured on mo/day/yr 6/7/93



Blank casing diameter 5 in. to 40 ft. Dia. in. to ft. Dia. in. to ft.
Casing height above land surface 12 in. weight 2.8 lbs./ft. Wall thickness or gauge No. Sch. 40

SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped	<u>8 Saw cut</u>	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 40	ft. to 50	ft. From	ft. to	ft.
	From	ft. to	ft. From	ft. to	ft.
GRAVEL PACK INTERVALS:	From 20	ft. to 50	ft. From	ft. to	ft.
	From	ft. to	ft. From	ft. to	ft.

6	GROUT MATERIAL:				1 Neat cement	2 Cement grout	3 <u>Bentonite</u>	4 Other
Grout Intervals:		From	0	ft. to	20	ft.	From	
							ft. to	
							ft.	

What is the nearest source of possible contamination:			10 Livestock pens	14 Abandoned water well
1 Septic tank	4 Lateral lines	7 Pit privy	11 Fuel storage	15 Oil well/Gas well
2 <u>Sewer lines</u>	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	16 Other (specify below)
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage	

Direction from well?	East	How many feet?	40
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[illegible]

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) 6/7/93 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186 This Water Well Record was completed on (mo/day/yr) 7/31/93 under the business name of Kelly's Water Well Service, 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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.