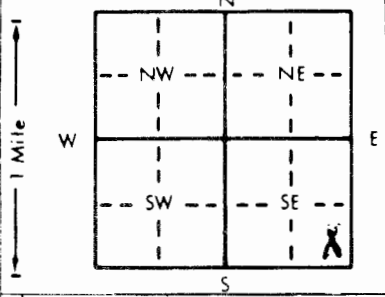


1 LOCATION OF WATER WELL: County: Rush Fraction: c/e 1/4 SE 1/4 SE 1/4 Section Number: 24 Township Number: T 19 S Range Number: R 18 W

Distance and direction from nearest town or city street address of well if located within city?
5 3/4 south, 2 1/8 east of Rush Center, Ks

2 WATER WELL OWNER: JoHanna Stuckeckemann
 RR#, St. Address, Box #: 14608 Embry Path Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Apple Valley, Minnesota 55124 Application Number: _____

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



4 DEPTH OF COMPLETED WELL: 185 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered: 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 90 ft. below land surface measured on mo/day/yr 7-28-92
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield: na gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: 10 in. to 185 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 Stock well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was sub-
 mitted _____ Water Well Disinfected? Yes hth No _____

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: 5 in. to 165 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface: 2' in. weight 258 lbs./ft. Wall thickness or gauge No. _____
 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:
 5 Gauzed wrapped 8 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: 165 ft. to 185 ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From: 28 ft. to 185 ft. From 26 ft. to 20 ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Hole plug
 Grout Intervals: From: 0 ft. to 20 ft. From 26 ft. to 28 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 east How many feet? 1000'

FROM		TO		LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3			Top soil			
3	15			Brownclay			
15	16			Sand and gravel			
16	21			Yellow brown rock and clay			
21	98			Black and blue shale			
98	103			Sandy shale and iron pyrite			
103	118			shale -blue shale			
118	125			Green, Gray sandy shale, iron pyrite & coal			
125	142			Gray shale			
142	150			Sand rock streaks & sandy shale			
150	180			Sand rock			
180	185			Sandy shale and sand rock			

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) 7-28-92 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo/day/yr) 8-12-92 under the business name of Rosencrantz-Bemis by (signature) Fredrick Jackson

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.