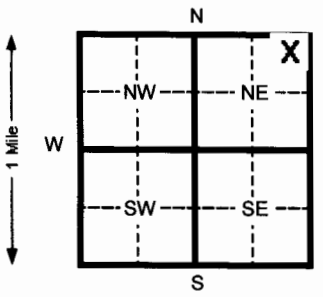
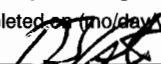


1 LOCATION OF WATER WELL: County: Decatur		Fraction NE 1/4 NE 1/4 NE 1/4	Section Number 34	Township Number T 1 S	Range Number R 30 E W	
Distance and direction from nearest town or city street address of well if located within city?						
2 WATER WELL OWNER: Sam McCleneghan III RR#, St. Address, Box # : 15098 HWY 9 City, State, ZIP Code : Breckenridge, CO 80424 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 100 ft. ELEVATION: Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 52 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 100 ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well <input checked="" type="checkbox"/> 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 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 <input checked="" type="checkbox"/> No				
5 TYPE OF BLANK CASING USED: 1 Steel 2 PVC <input checked="" type="checkbox"/> 3 RMP (SR) 4 ABS 5 Wrought Iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) Blank casing diameter 4.5 in. to 80 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface 18 in., weight 2.38 lbs./ft. Wall thickness or gauge No. .248 TYPE OF SCREEN OR PERFORATION MATERIAL: <input checked="" type="checkbox"/> 7 PVC 10 Asbestos-cement 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 8 RMP (SR) 9 ABS 11 Other (specify) 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole) SCREEN-PERFORATED INTERVALS: From 80 ft. to 100 ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 20 ft. to 100 ft. From _____ ft. to _____ ft.						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite <input checked="" type="checkbox"/> 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 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/ Gas well 16 Other (specify below) None Direction from well? _____ How many feet? _____						
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2		Surface			
2	28		Loess			
28	34		Clay w/caliche lenses			
34	40		Fine to some med sand w/clay lenses			
40	70		Fine & med sand w/caliche lenses			
70	80		Fine & med sand w/clay lenses			
80	90		Fine & med sand			
90	100		Black shale			
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) 11/17/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 783 This Water Well Record was completed on (mo/day/yr) 11-19-08 under the business name of Woofter Pump & Well Inc. by (signature) 						

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INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.