

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <u>Stafford</u>		<u>NW 1/4 NW 1/4 SW 1/4</u>		<u>35</u>		<u>T 21 S</u>		<u>R 12</u> 12 12	
Distance and direction from nearest town or city street address of well if located within city? <u>5 North, 2 East of Hudson, Ks.</u>									
2 WATER WELL OWNER: <u>Shelby Resources, Inc.</u>									
RR#, St. Address, Box # : <u>5893 Saddle Creek</u>						SFWW2950			
City, State, ZIP Code : <u>Parker, Ks. 80134</u>						Board of Agriculture, Division of Water Resources Application Number: <u>20040234</u>			
3 LOCATE WELL'S LOCATION WITH		4 DEPTH OF COMPLETED WELL <u>90</u> ft. ELEVATION: _____							
AN "X" IN SECTION BOX:		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL <u>15</u> ft. below land surface measured on mo/day/yr <u>10-22-04</u> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield <u>N/A</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 <u>Oil field water supply</u> 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well _____							
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> _____; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes <u>HTH</u> No _____							
5 TYPE OF BLANK CASING USED:									
1 Steel		3 RMP (SR)		5 Wrought iron		8 Concrete tile		CASING JOINTS: Glued <u>X</u> Clamped _____	
2 <u>PVC</u>		4 ABS		6 Asbestos-Cement		9 Other (specify below) _____		Welded _____	
				7 Fiberglass				Threaded _____	
Blank casing diameter _____ 5 in. to _____ 70 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Casing height above land surface _____ 36 in., weight _____ SDR-26 lbs./ft. Wall thickness or gauge No. _____									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel		3 Stainless Steel		5 Fiberglass		7 <u>PVC</u>		10 Asbestos-Cement	
2 Brass		4 Galvanized Steel		6 Concrete tile		8 RMP (SR)		11 Other (Specify) _____	
						9 ABS		12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:									
1 Continuous slot		3 Mill slot		5 Gauzed wrapped		8 <u>Saw cut</u>		11 None (open hole)	
2 Louvered shutter		4 Key punched		6 Wire wrapped		9 Drilled holes			
				7 Torch cut		10 Other (specify) _____		ft.	
SCREEN-PERFORATED INTERVALS: From _____ 90 ft. to _____ 70 ft., From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From _____ 90 ft. to _____ 20 ft., From _____ ft. to _____ ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <u>hole plug</u>									
Grout Intervals: From _____ 20 ft. to _____ 0 ft., From _____ ft. to _____ 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		<u>None</u>	
Direction from well? _____ How many feet? _____									
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS				
0	20	<u>Clay</u>							
20	75	<u>Sandy clay</u>							
75	90	<u>Sand & gravel</u>							
						RECEIVED			
						NOV 29 2004			
						BUREAU OF WATER			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>10-22-04</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No <u>134</u> This Water Well Record was completed on (mo/day/yr) <u>10-25-04</u> under the business name of <u>Rosencrantz- Bemis</u> by (signature) <u>John Albee</u>									
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well.									