

<b>1 LOCATION OF WATER WELL:</b>		Fraction	Section Number	Township Number	Range Number
County: <u>PAWNEE</u>		<u>NW 1/4 NW 1/4 SW 1/4</u>	<u>11</u>	T <u>21</u> S	R <u>20</u> E <u>(W)</u>
Distance and direction from nearest town or city street address of well if located within city? <u>BURDETT 1/4N 1 1/2E 2 1/2N EASTSIDE</u>					
<b>2 WATER WELL OWNER:</b> <u>EMPHASIS OIL OPERATION</u>					
RR#, St Address, Box # : <u>506</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>RUSSELL, KS 67665</u>			Application Number: <u>T82-517</u>		
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>		<b>4 DEPTH OF COMPLETED WELL:</b> <u>75</u> ft. <b>ELEVATION:</b>			
		Depth(s) Groundwater Encountered 1. .... <u>- DRY HOLE</u> ..... ft. 3. .... ft.			
		WELL'S STATIC WATER LEVEL <u>DRY HOLE</u> ft. below land surface measured on mo/day/yr <u>9-27-82</u>			
		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. <u>7.718</u> in. to <u>7.5</u> in. to ..... in. to ..... in.			
		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 <u>7 Lawn and garden only</u> 10 Observation well			
		Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes No			
<b>5 TYPE OF BLANK CASING USED:</b> <u>NONE</u>					
Blank casing diameter ... <u>NONE</u> in. to ... <u>0</u> ft., Dia ... in. to ... ft., Dia ... in. to ... ft.					
Casing height above land surface ... <u>0</u> in., weight ... <u>0</u> lbs./ft. Wall thickness or gauge No. ... <u>0</u>					
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> <u>NONE</u>					
SCREEN OR PERFORATION OPENINGS ARE: <u>NONE</u>					
GRAVEL PACK INTERVALS: From ... <u>0</u> ft. to ... <u>0</u> ft., From ... ft. to ... ft.					
GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Intervals: From ... <u>0</u> ft. to ... <u>1.0</u> ft., From ... ft. to ... ft., From ... ft. to ... ft.					
What is the nearest source of possible contamination: <u>NONE</u>					
Direction from well?					
How many feet?					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
<u>0</u>	<u>3</u>	<u>SOIL</u>			
<u>3</u>	<u>20</u>	<u>SANDY CLAY</u>			
<u>20</u>	<u>50</u>	<u>CLAY</u>			
<u>50</u>	<u>55</u>	<u>SANDROCK</u>			
<u>55</u>	<u>60</u>	<u>CLAY</u>			
<u>60</u>	<u>75</u>	<u>BLUE SHALE</u>			
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>9-27-82</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>389</u> . This Water Well Record was completed on (mo/day/yr) <u>10-6-82</u> under the business name of <u>REISER WATER WELL SERV. INC.</u> by (signature) <u>[Signature]</u>					
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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					