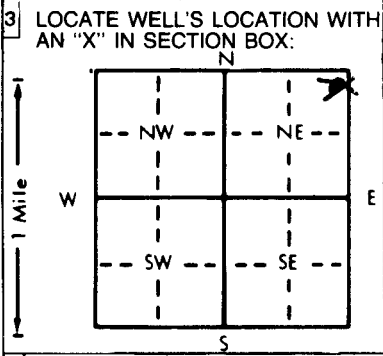


1 LOCATION OF WATER WELL: Fraction NE 1/4 NE 1/4 NE 1/4 Section Number 19 Township Number T 21 S Range Number R 6 **EW**
 County: Rice

Distance and direction from nearest town or city street address of well if located within city?
10 m. East of Sterling **EB262C**

2 WATER WELL OWNER: Equus Beds Groundwater Management District No. 2
 RR#, St. Address, Box #: 313 Spruce Street Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Halstead, KS 67056-1925 Application Number: N/A



4 DEPTH OF COMPLETED WELL: 65 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 3.9 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 3.9 ft. below land surface measured on mo/day/yr 11-19-96
 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 6 in. to 69.5 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 1X Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X _____; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes _____ No X _____

5 TYPE OF BLANK CASING USED:
 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued PVC Clamped _____
 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded steel
 Blank casing diameter 2 steel in. to 7 ft., Dia. 2 PVC in. to 55 ft., Dia. _____ in. to _____ ft.
 Casing height above land surface 36 in., weight PVC 70 lbs./ft. Wall thickness or gauge No. 154
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 PVC 10 Asbestos-cement
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot X Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From 55 ft. to 65 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 50 ft. to 69.5 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: X Neat cement 2 Cement grout X3 Bentonite 4 Other _____
 Grout Intervals: From 5 ft. to 50 ft., From 3.5 ft. to 0 ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: none observed
 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? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	tan-brown soil, sandy			
2	23	green, clay-shale, sticky			
23	50	light green shale, very sandy			
50	65	light gray to white sandstone			
65	69.5	maroon shale, silty, firm			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was X constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 12/27/96 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 138 This Water Well Record was completed on (mo/day/yr) 1/22/97 under the business name of Peterson Irrigation, Inc. by (signature) Mike Peterson

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.