

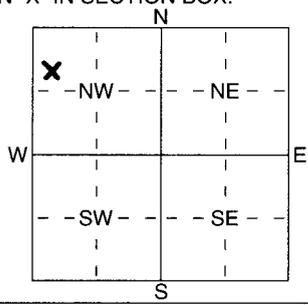
# 8

1 LOCATION OF WATER WELL: Fraction SW 1/4 NW 1/4 NW 1/4 Section Number 8 Township Number T 23 S Range Number R 24 E **(W)**  
 County: Hodgeman

Distance and direction from nearest town or city street address of well if located within city? 615 38° 04' 266' N  
99° 59' 402' W

2 WATER WELL OWNER: Richard Snodgrass  
 RR#, St. Address, Box #: Box 200 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Jctmore Ks 67854 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL 200 ft. ELEVATION: 2343



Depth(s) Groundwater Encountered 1 ..... ft. 2 ..... ft. 3 ..... ft.  
 WELL'S STATIC WATER LEVEL ..... 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  
 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 Domestic (lawn & garden) 10 Monitoring well  
closed loop heat pump well  
 Was a chemical/bacteriological sample submitted to Department? Yes ..... No ; If yes, mo/day/yr sample was submitted  
 Water Well Disinfected? Yes ..... No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ..... Clamped .....  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....  
 2 PVC 4 ABS 7 Fiberglass Threaded .....

Blank casing diameter ..... in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface ..... in., weight ..... lbs./ft. Wall thickness or guage No. ....

TYPE OF SCREEN OR PERFORATION MATERIAL: 7 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 Guazed 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) ..... ft.

SCREEN-PERFORATED INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout **3 Bentonite** 4 Other .....  
 Grout Intervals: From 200 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 **11 Fuel storage** 14 Abandoned water well  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/Gas well  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below)

Direction from well? WSW How many feet? 30

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	30	sandy loam	200	0	high solids bentonite
30	55	rock & large gravel			13.4 #/gal
55	90	limestone			
90	100	course sand			
100	130	limestone			
130	140	gravel			
140	180	clay			
180	200	limestone			

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) 01/13/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 733 This Water Well Record was completed on (mo/day/yr) 01/13/05 under the business name of C & C Loop Drilling by (signature) [Signature]

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, 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 constructed well.