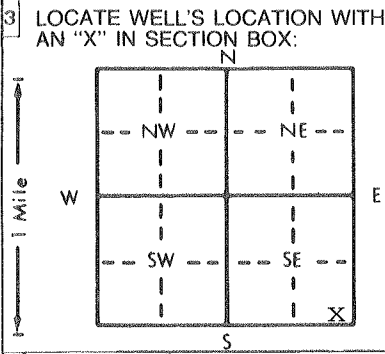


1 LOCATION OF WATER WELL: Fraction SE 1/4 SE 1/4 SE 1/4 Section Number 30 Township Number T 23 S Range Number R 35 E(W)  
 County: Kearny  
 Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: Phillip Howell  
 RR#, St. Address, Box # : 1066 Mansion Ridge Rd. Board of Agriculture, Division of Water Resource  
 City, State, ZIP Code : Sante Fe, N.M. 87501-1049 Application Number:



4 DEPTH OF COMPLETED WELL: 126 ft. ELEVATION: .....  
 Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL 94 ft. below land surface measured on mo/day/yr 7-17-95  
 Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield 17 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Bore Hole Diameter: 10 in. to 126 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  Other (Specify below)  
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well ..... stock .....  
 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 .....  
 PVC 4 ABS 7 Fiberglass Threaded .....  
 Blank casing diameter 5 in. to 126 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface 12 in., weight ..... lbs./ft. Wall thickness or gauge No. 200 psi  
 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  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) .....  
 SCREEN-PERFORATED INTERVALS: From 106 ft. to 126 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 25 ft. to 126 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout  Bentonite 4 Other .....  
 Grout Intervals: From 0 ft. to 25 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 What is the nearest source of possible contamination:  Livestock pens 14 Abandoned water well  
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage .....  
 Direction from well? How many feet? 500

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	top soil			
1	21	brown clay			
21	31	coarse sand & gravel			
31	38	brown clay			
38	43	coarse sand & gravel			
43	92	brown clay & gypsum			
92	124	medium to coarse sand & gravel			
124	126	brown clay			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was  constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 7-17-95 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 532 This Water Well Record was completed on (mo/day/yr) 7-25-95 under the business name of Midwest Well & Pump by (signature) Victor Saupe

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.