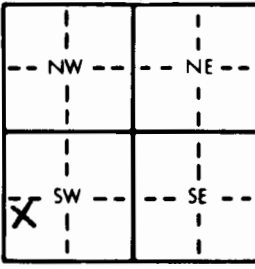


1 LOCATION OF WATER WELL: County: <b>RENO</b>		Fraction <b>NW 1/4 SW 1/4 SW 1/4</b>		Section Number <b>24</b>		Township Number <b>T 23 S</b>		Range Number <b>R 6 E</b>			
Distance and direction from nearest town or city street address of well if located within city? <b>128 N. MAIN SO. HUTCHINSON</b>											
2 WATER WELL OWNER: <b>RUSSEL DEWATER</b>											
RR#, St. Address, Box # : <b>221 E. AVE E</b>						Board of Agriculture, Division of Water Resources					
City, State, ZIP Code : <b>SO. HUTCHINSON, KS 67505</b>						Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:				4 DEPTH OF COMPLETED WELL: <b>15</b> ft. ELEVATION: <b>1526.08</b>							
				Depth(s) Groundwater Encountered 1. <b>7</b> ft. 2. <b>7</b> ft. 3. <b>7</b> ft.							
				WELL'S STATIC WATER LEVEL <b>7.65</b> ft. below land surface measured on mo/day/yr <b>9-26-95</b>							
				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 <b>8</b> in. to _____ ft. and _____ in. to _____ ft.				WELL WATER TO BE USED AS:							
1 Domestic				3 Feedlot		6 Oil field water supply		9 Dewatering		11 Injection well	
2 Irrigation				4 Industrial		7 Lawn and garden only		10 <b>Monitoring well</b>		12 <b>Other (Specify below)</b>	
										<b>OBSERVATION</b>	
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was submitted											
Water Well Disinfected? Yes _____ No <b>X</b>											
5 TYPE OF BLANK CASING USED:											
1 Steel											
2 <b>PVC</b>											
3 RMP (SR)											
4 ABS											
5 Wrought iron											
6 Asbestos-Cement											
7 Fiberglass											
8 Concrete tile											
9 Other (specify below)											
CASING JOINTS: Glued _____ Clamped _____											
Welded _____											
Threaded _____											
Blank casing diameter <b>2</b> in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.											
Casing height above land surface <b>FLUSH</b> in. weight <b>70.3</b> lbs./ft. Wall thickness or gauge No. <b>154</b>											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
1 Steel											
2 Brass											
3 Stainless steel											
4 Galvanized steel											
5 Fiberglass											
6 Concrete tile											
7 <b>PVC</b>											
8 RMP (SR)											
9 ABS											
10 Asbestos-cement											
11 Other (specify)											
12 None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE:											
1 Continuous slot											
2 Louvered shutter											
3 <b>Mill slot</b>											
4 Key punched											
5 Gauzed wrapped											
6 Wire wrapped											
7 Torch cut											
8 Saw cut											
9 Drilled holes											
10 Other (specify)											
11 None (open hole)											
SCREEN-PERFORATED INTERVALS: From <b>5</b> ft. to <b>15</b> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.											
GRAVEL PACK INTERVALS: From <b>3</b> ft. to <b>15</b> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.											
6 GROUT MATERIAL:											
1 Neat cement											
2 Cement grout											
3 <b>Bentonite</b>											
4 Other											
Grout Intervals: From <b>1</b> ft. to <b>3</b> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.											
What is the nearest source of possible contamination:											
1 Septic tank											
2 Sewer lines											
3 Watertight sewer lines											
4 Lateral lines											
5 Cess pool											
6 Seepage pit											
7 Pit privy											
8 Sewage lagoon											
9 Feedyard											
10 Livestock pens											
11 <b>Fuel storage</b>											
12 Fertilizer storage											
13 Insecticide storage											
14 Abandoned water well											
15 Oil well/Gas well											
16 Other (specify below)											
Direction from well? <b>SW</b>											
How many feet? <b>125'</b>											
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS											
<b>0 5 ALLUVIUM, SILT, LEAN CLAY</b>											
<b>5 15 POOR TO WELL SAND w/CLAY</b>											
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <b>(1)</b> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>9-26-95</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>531</b> This Water Well Record was completed on (mo/day/yr) <b>10-26-95</b> under the business name of <b>GSI</b> by (signature) <b>Math (initial)</b>											