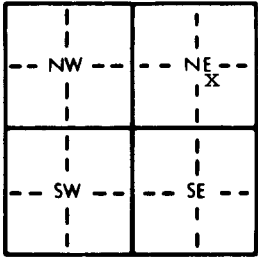
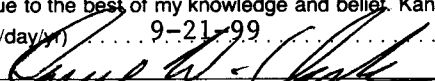


1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Harvey		NW 1/4 SE 1/4 NE 1/4		9		T 24 S		R 1 E/W	
Distance and direction from nearest town or city street address of well if located within city? Approximately 4 3/4 miles north of Sedgwick									
2 WATER WELL OWNER:		Public Wholesale Water Supply District No. 17							
RR#, St. Address, Box # :		P.O. Box 426				Board of Agriculture, Division of Water Resources			
City, State, ZIP Code :		Newton, KS 67114				Application Number: 42,127			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 107 ft. ELEVATION: unknown							
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.							
		WELL'S STATIC WATER LEVEL . . . 18 . . . ft. below land surface measured on mo/day/yr 9-14-99							
		Pump test data: Well water was not ch'd. ft. after hours pumping gpm							
		Est. Yield unknown gpm: Well water was ft. after hours pumping gpm							
		Bore Hole Diameter . . 42 . . . in. to . . 106 . . . 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 10 Monitoring well									
Was a chemical/bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted									
Water Well Disinfected? Yes <input checked="" type="checkbox"/> No									
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped									
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded <input checked="" type="checkbox"/>									
3 Fiberglass Threaded									
Blank casing diameter . . 12 3/4 . . . in. to . . 67.37 . . . ft., Dia in. to ft., Dia in. to ft.									
Casing height above land surface . . 12 . . . in., weight . . 49.56 . . . lbs./ft. Wall thickness or gauge No. . . 375									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement									
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify)									
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 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 . . . 67.37 . . . ft. to . . 106 . . . ft., From ft. to ft.									
From ft. to ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From . . . 62 . . . ft. to . . 106 . . . ft., From ft. to ft.									
From ft. to ft., From ft. to ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other 50% Bentonite Holeplug & 50% Sand									
Grout Intervals: From . . 0 . . . ft. to . . 5 . . . ft., From . . 26 . . . ft., From . . 57 . . . ft. to . . 62 . . . ft., From . . 26 . . . ft. to . . 57 . . . ft.									
What is the nearest source of possible contamination:									
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 None known									
Direction from well? How many feet?									
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
0 2 Topsoil 92 94 Sand and gravel with clay									
2 12 Clay, brown 94 106 Sand and gravel, fine, medium									
12 15 Sand and gravel									
15 16 Clay									
16 18 Sand and gravel									
18 21 Clay									
21 23 Sand and gravel, fine, medium									
23 31 Clay, dark brown									
31 35 Sand and gravel, fine, medium									
35 39 Clay and sand									
39 59 Sand and gravel, fine, medium, some coarse									
59 64 Clay, brown, some gravel									
64 68 Clay, brown, sticky									
68 92 Sand and gravel, fine, medium									
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) . . . 9-14-99 and this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's License No. . . . 185 This Water Well Record was completed on (mo/day/yr) . . 9-21-99									
under the business name of Clarke Well & Equipment, Inc. by (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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									