

1 LOCATION OF WATER WELL: County: Edwards Fraction SW 1/4 SW 1/4 SW 1/4 Section Number 25 Township Number T 24 S Range Number R 16 E/W

Distance and direction from nearest town or city street address of well if located within city? 2-S 4-E of Belpre, Ks.

2 WATER WELL OWNER: Abbe Miller RR#, St. Address, Box #: Rt. 1 Box 107-A City, State, ZIP Code: Macksville, Ks. 67557 Board of Agriculture, Division of Water Resources Application Number: T89-406

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: [Diagram showing a 2x2 grid with NW, NE, SW, SE quadrants and an 'X' in the SW quadrant] 4 DEPTH OF COMPLETED WELL: 76 ft. ELEVATION: 30 ft. below land surface measured on mo/day/yr

5 TYPE OF BLANK CASING USED: 1 Steel, 2 PVC, 3 RMP (SR), 4 ABS, 5 Wrought iron, 6 Asbestos-Cement, 7 Fiberglass, 8 Concrete tile, 9 Other (specify below), CASING JOINTS: Glued (checked), Clamped, Welded, Threaded. Blank casing diameter: 5 in. to 66 ft., Dia. Casing height above land surface: 12 in., weight lbs./ft. Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: (checked) PVC, 10 Asbestos-cement, 11 Other (specify), 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: (checked) Mill slot, 6 Wire wrapped, 9 Drilled holes, 10 Other (specify). SCREEN-PERFORATED INTERVALS: From 66 ft. to 76 ft. GRAVEL PACK INTERVALS: From 20 ft. to 76 ft.

6 GROUT MATERIAL: (checked) Neat cement, 2 Cement grout, 3 Bentonite, 4 Other. Grout Intervals: From 0 ft. to 20 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 Fuel storage, 12 Fertilizer storage, 13 Insecticide storage, 14 Abandoned water well, 15 Oil well/Gas well, 16 Other (specify below) none. Direction from well? How many feet?

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, PLUGGING INTERVALS. Data: 0-3 Top soil, 3-54 Clay, 54-76 Gravel.

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) 9-22-89 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 462. This Water Well Record was completed on (mo/day/year) 11-1-89 under the business name of Sam's Water Well 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 to three copies to Kansas Department of Health and Environment, Bureau of Water Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T R E/W SEC.