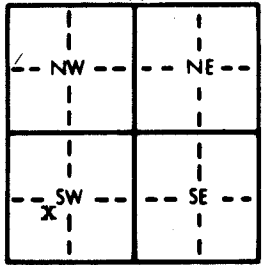


1 LOCATION OF WATER WELL: Fraction NE 1/4 SW 1/4 SW 1/4 Section Number 31 Township Number T 24 S Range Number R 17 **EW**  
 County: **Edwards**

Distance and direction from nearest town or city street address of well if located within city?  
**3/4 mile east 1 mile south 1/2 east 3/4 south 3/8 west of Lewis**

2 WATER WELL OWNER: **Robert Cross**  
 RR#, St. Address, Box # :  
 City, State, ZIP Code : **Lewis Kansas 67552**  
 Board of Agriculture, Division of Water Resources  
 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
  
 4 DEPTH OF COMPLETED WELL: **80** ft. ELEVATION:  
 Depth(s) Groundwater Encountered 1. **42** ft. 2. ft. 3. ft.  
 WELL'S STATIC WATER LEVEL **42** ft. below land surface measured on **12/30/88**  
 Pump test data: Well water was **42** ft. after **1/2** hours pumping **100** gpm  
 Est. Yield **100** gpm: Well water was ft. after hours pumping gpm  
 Bore Hole Diameter **8 3/4** in. to **80** ft., and in. to ft.  
 WELL WATER TO BE USED AS:  
 1 Steel 3 RMP (SR) 5 Public water supply 8 Air conditioning 11 Injection well  
 2 PVC 4 ABS 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  
 3 Stainless steel 7 Lawn and garden only 10 Observation well  
 1 Irrigation 4 Industrial 7  
 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:  
 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  
 7 Fiberglass Threaded  
 Blank casing diameter **5** in. to **60** ft., Dia in. to ft., Dia in. to ft.  
 Casing height above land surface **12** in., weight lbs./ft. Wall thickness or gauge No. **SDR 26**  
 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:  
 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 **60** ft. to **80** ft., From ft. to ft.  
 From ft. to ft., From ft. to ft.  
 GRAVEL PACK INTERVALS: From **20** ft. to **80** 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  
 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 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  
 Direction from well? **west** How many feet? **40**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	1	Topsoil			
1	19	Gray clay			
19	24	Sand			
24	36	Tan clay			
36	80	Sand & Gravel			
80		Clay			

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) **12/30/88** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **224** This Water Well Record was completed on (mo/day/yr) **1/9/89**  
 under the business name of **Carl Hayse Water Well Service** by (signature) *Carl Hayse*

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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T R EW SEC. 1/4 1/4 1/4