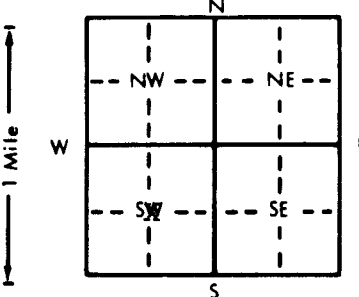


1 LOCATION OF WATER WELL: Fraction Near Center of Section Number 32 Township Number T 24 S Range Number R 17 E/W
 County: / Edwards $\frac{1}{4}$ $\frac{1}{4}$ SW $\frac{1}{4}$

Distance and direction from nearest town or city street address of well if located within city?
1 1/2 miles south and 1 1/4 miles east of Lewis, KS

2 WATER WELL OWNER: Jim Cross
 RR#, St. Address, Box # : Box 67 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Lewis, KS 67557 Application Number: Not available

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

 4 DEPTH OF COMPLETED WELL: 80 ft. ELEVATION: UNKNOWN
 Depth(s) Groundwater Encountered 1. 28 1/2 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 28 1/2 ft. below land surface measured on mo/day/yr 12/18/80
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 1100 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: 24 in. to 80 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 Observation well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes _____ No X

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 XX
 7 Fiberglass _____ Threaded _____
 Blank casing diameter 16 in. to 40 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 12 in., weight 31.75 lbs./ft. Wall thickness or gauge No. 188
 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) _____
 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) Daerr Bridge Slot
 SCREEN-PERFORATED INTERVALS: From 40 ft. to 80 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 10 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 10 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) FIELD
 13 Insecticide storage _____
 Direction from well? ALL DIRECTIONS How many feet? Not Applicable

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Topsoil			
3	8	Gray sandy clay			
8	22	V.fine sand & gravel			
22	25	Sandy brown & tan clay w/caliche			
25	40	Fine-med sandy & gravel, some coarse strk			
40	46	Med-coarse sand & gravel			
46	53	Fine-med sand & gravel w/coarse strks			
53	57	Yellow & tan sandy clay, streak of cemented sand @ 56'			
57	60	Fine sand & gravel			
60	62	Yellow sandy clay & cemented sand			
62	66	Fine-med sand & gravel			
66	68	Med.-coarse sand & gravel			
68	76	Tan & brown sandy clay			
76	80	Brown clay w/caliche streaks			

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) XXXX 12/18/80 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) 6/26/91 under the business name of Clarke Well & Eq., Inc. 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 top three copies to Kansas Department of Health and Environment, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T 24 R 17

EW

SEC. 32

C 18 SW 1/4

1/4