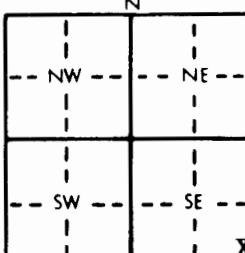
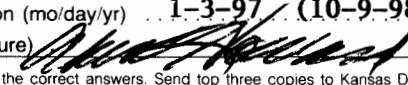


1 LOCATION OF WATER WELL:		Fraction SE 1/4 SE 1/4 SE 1/4	Section Number 11	Township Number T 24 S	Range Number R 30 EW
Distance and direction from nearest town or city street address of well if located within city? <b>From Highway 50 at Charleston - 7 1/2 Miles North, 133 ft. west &amp; 52 ft. north</b>					
2 WATER WELL OWNER: <b>Minter-Wilson Drilling Co., Inc.</b>			Garden City Coop Board of Agriculture, Division of Water Resources Application Number: <b>10,881</b>		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <b>240</b> ft. ELEVATION: _____			
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft. <b>1/3/97</b> WELL'S STATIC WATER LEVEL <b>145</b> ft. below land surface measured on mo/day/yr Pump test data: Well water was <b>.210</b> ft. after <b>1</b> hours pumping <b>100</b> gpm Est. Yield gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter <b>11</b> in. to <b>240</b> 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 <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
5 TYPE OF BLANK CASING USED:					
1 Steel <b>2 PVC</b>		3 RMP (SR) <b>4 ABS</b>		5 Wrought iron <b>6 Asbestos-Cement</b> 8 Concrete tile 9 Other (specify below) <b>7 PVC</b> 10 Asbestos-cement	
Casing joints: Glued <input checked="" type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded <input type="checkbox"/>					
Blank casing diameter <b>6</b> in. to <b>180</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface <b>24</b> in., weight <b>2.902</b> lbs./ft. Wall thickness or gauge No. <b>21 SDR .280</b>					
6 TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel <b>2 Brass</b>		3 Stainless steel <b>4 Galvanized steel</b>		5 Fiberglass <b>6 Concrete tile</b> 8 RMP (SR) 9 ABS <b>7 PVC</b> 10 Asbestos-cement 11 Other (specify) <b>12 None used (open hole)</b>	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot <b>2 Louvered shutter</b>		3 Mill slot <b>4 Key punched</b>		5 Gauzed wrapped <b>6 Wire wrapped</b> 7 Torch cut <b>8 Saw cut</b> 11 None (open hole) 9 Drilled holes <b>10 Other (specify)</b>	
SCREEN-PERFORATED INTERVALS: From <b>180</b> ft. to <b>240</b> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <b>160</b> ft. to <b>240</b> ft., From _____ ft. to _____ ft.					
7 GROUT MATERIAL: <b>1 Neat cement</b> 2 Cement grout 3 Bentonite <b>4 Other</b> <b>Hole plug</b>					
Grout intervals: From <b>0</b> ft. to <b>20</b> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank <b>2 Sewer lines</b> <b>3 Watertight sewer lines</b>		4 Lateral lines <b>5 Cess pool</b> <b>6 Seepage pit</b>		7 Pit privy <b>8 Sewage lagoon</b> <b>9 Feedyard</b> <b>10 Livestock pens</b> <b>11 Fuel storage</b> <b>12 Fertilizer storage</b> <b>13 Insecticide storage</b> <b>14 Abandoned water well</b> <b>15 Oil well/Gas well</b> <b>16 Other (specify below)</b>	
Direction from well?					
FROM	TO	LITHOLOGIC LOG		FROM	TO
<b>0</b>	<b>20</b>	<b>Clay</b>		<b>220</b>	<b>240</b>
<b>20</b>	<b>30</b>	<b>Clay / Sandy Clay</b>		<b>Black Clay</b>	
<b>30</b>	<b>52</b>	<b>Clay</b>			
<b>52</b>	<b>75</b>	<b>Coarse Sand</b>			
<b>75</b>	<b>83</b>	<b>Sand Stone</b>			
<b>83</b>	<b>99</b>	<b>Med. - Lg. Gravel</b>			
<b>99</b>	<b>120</b>	<b>Clay</b>			
<b>120</b>	<b>132</b>	<b>Sandy Clay</b>			
<b>132</b>	<b>138</b>	<b>Clay</b>			
<b>138</b>	<b>160</b>	<b>Sandy Clay / Clay</b>			
<b>160</b>	<b>167</b>	<b>Sandy Clay</b>			
<b>167</b>	<b>179</b>	<b>Clay</b>			
<b>179</b>	<b>201</b>	<b>Coarse Sand</b>			
<b>201</b>	<b>210</b>	<b>Yellow Clay / Sand streaks</b>			
<b>210</b>	<b>220</b>	<b>Yellow &amp; Blue Clay</b>			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <b>(1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>1-3-97</b></b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>KWCL - 430</b> This Water Well Record was completed on (mo/day/year) <b>1-3-97 (10-9-98)</b> under the business name of <b>Howard Drilg. Box 806, Beaver, Ok. 73932</b> 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.					