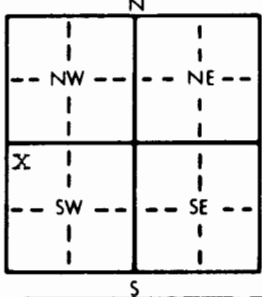


1 LOCATION OF WATER WELL: County: Kearny Fraction NW 1/4 NW 1/4 SW 1/4 Section Number 2 Township Number T 25 S Range Number R 36 EW

Distance and direction from nearest town or city street address of well if located within city?  
1 mile south, 1/2 mile east & 1/2 mile south of Lakin, Kansas

2 WATER WELL OWNER: Doug Harris  
 RR#, St. Address, Box # : Route #1 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : Lakin, Kansas 67860 Application Number:

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



4 DEPTH OF COMPLETED WELL... 293 ft. ELEVATION: ..... ft.  
 Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL ... 17 ft. below land surface measured on mo/day/yr 8-2-84  
 Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield .. 20 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Bore Hole Diameter... 10 in. to 293 ft., and ..... in. to ..... ft.  
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well  
 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........; 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 .....  
 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded .....  
 7 Fiberglass ..... Threaded.....  
 Blank casing diameter .... 5 in. to 273 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface... 12 in., weight ..... lbs./ft. Wall thickness or gauge No. 200 psi

TYPE OF SCREEN OR PERFORATION MATERIAL:  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: 5 Gauzed wrapped  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... 273 ft. to 293 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From... 17 ft. to 263 ft., From ..... ft. to ..... ft.  
 From 273 ft. to 293 ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement  Cement grout  Bentonite 4 Other .....  
 Grout Intervals: From... 7 ft. to 17 ft., From 263 ft. to 273 ft., From ..... ft. to ..... ft.  
 What is the nearest source of possible contamination:  
 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? How many feet? 100 ft.

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	top soil			
2	7	70/brown clay			
7	48	48/7 gravel & coarse sand			
48	60	60/brown clay			
60	70	70/gray clay			
70	80	80/7 fine sand			
80	100	100/gray clay			
100	130	130/5 fine & coarse sand			
130	160	160/gray clay			
160	200	200/7 coarse sand & gravel			
200	228	228/1 brown clay			
228	234	234/7 fine sand			
234	260	260/1 brown clay			
260	293	293/9 coarse sand			

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) 8-2-84 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 449 This Water Well Record was completed on (mo/day/yr) 8-13-84 under the business name of Midwest Well & Pump by (signature) Arthur Lubman

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 25 R 36 EWD SEC. 2

