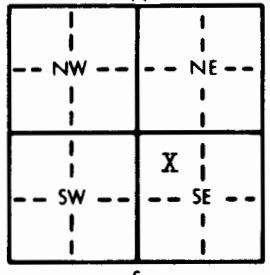


1 LOCATION OF WATER WELL: County: <u>Pratt</u>	Fraction <u>C</u> 1/4 <u>NW</u> 1/4 <u>SE</u> 1/4	Section Number <u>7</u>	Township Number <u>T 26</u> <u>S</u>	Range Number <u>R 11W</u> <u>EW</u>
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Distance and direction from nearest town or city street address of well if located within city?  
2 1/2 N, 1/2 W of Preston, Kansas

2 WATER WELL OWNER: <u>Don Mardis</u> RR#, St. Address, Box #: <u>Preston, Kansas</u> City, State, ZIP Code: <u>67569</u>	<u>Transpac Drilling</u> <u>One Main Place</u> <u>Wichita, Kansas 67202</u>	Board of Agriculture, Division of Water Resources Application Number: <u>Unknown</u>
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>90</u> ft. ELEVATION: <u>Unknown</u> Depth(s) Groundwater Encountered <u>1.30</u> ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr <u>3/17/82</u> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield <u>.60</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter... <u>.8</u> in. to <u>.90</u> ft., and _____ in. to _____ ft. WELL WATER TO BE USED AS: 5 Public water supply      8 Air conditioning      11 Injection well 6 <u>Oil field water supply</u> 9 Dewatering      12 Other (Specify below) 1 Domestic      3 Feedlot      7 <u>Lawn and garden only</u> 10 Observation well 2 Irrigation      4 Industrial Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>_____</u> ; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No <u>_____</u>
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5 TYPE OF BLANK CASING USED: 1 Steel      3 RMP (SR) 2 <u>PVC</u> 4 ABS	5 Wrought iron      8 Concrete tile      CASING JOINTS: <u>Glued</u> Clamped _____ 6 Asbestos-Cement      9 Other (specify below)      Welded _____ 7 Fiberglass      Threaded _____
Blank casing diameter <u>.5</u> in. to <u>.70</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface <u>.12</u> in., weight <u>2.8</u> lbs./ft. Wall thickness or gauge No. <u>Sch. 40</u>	
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel      3 Stainless steel      5 Fiberglass      7 <u>PVC</u> 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 <u>Saw cut</u> 11 None (open hole) 2 Louvered shutter      4 Key punched      6 Wire wrapped      9 Drilled holes 7 Torch cut      10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS: From <u>.70</u> ft. to <u>.90</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.	
GRAVEL PACK INTERVALS: From <u>.10</u> ft. to <u>.90</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.	

6 GROUT MATERIAL: 1 <u>Neat cement</u> 2 Cement grout      3 Bentonite      4 Other _____	Grout Intervals: From <u>.0</u> ft. to <u>.10</u> 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 <u>Oil well/Gas well</u> 3 Watertight sewer lines      6 Seepage pit      9 Feedyard      12 Fertilizer storage      16 Other (specify below) 13 Insecticide storage	Direction from well? <u>South</u> How many feet? <u>60</u>

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	33	Clay			
33	90	Sand and 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) 3/17/82 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186. This Water Well Record was completed on (mo/day/yr) 4/29/82 under the business name of Kellys Water Well Service 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  
26  
R/11  
EWD  
SEC  
7  
C  
1/4  
NW  
1/4  
SE  
1/4