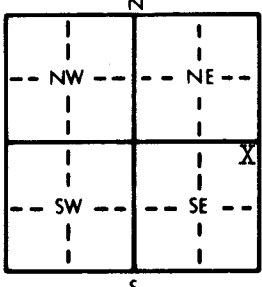


1 LOCATION OF WATER WELL: County: <u>Pratt</u>	Fraction <u>NE</u> 1/4 <u>NE</u> 1/4 <u>SE</u> 1/4	Section Number <u>29</u>	Township Number T <u>26</u> S	Range Number R <u>12W</u> E/W
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Distance and direction from nearest town or city street address of well if located within city?

4 E, 1 1/2 N of Iuka, Kansas

2 WATER WELL OWNER: <u>Gena Studer</u> RR#, St. Address, Box # : <u>Route 1</u> City, State, ZIP Code : <u>Pratt, Ks. 67124</u>	<u>Graves Drilling</u> <u>910 Union Center</u> <u>Wichita, Kansas 67202</u>	<u>Studer #6</u> <u>Stuedek</u> Board of Agriculture, Division of Water Resources Application Number:
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL... <u>95</u> ft. ELEVATION: Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft. WELL'S STATIC WATER LEVEL ... <u>50</u> ft. below land surface measured on <u>mo/day/yr</u> <u>9/10/85</u> Pump test data: Well water was .... ft. after .... hours pumping .... gpm Est. Yield .... gpm: Well water was .... ft. after .... hours pumping .... gpm Bore Hole Diameter .... in. to .... ft., and .... in. to .... ft. WELL WATER TYPE USED AS: 1 Domestic <u>WAS</u> 3 Feedlot 6 <u>Oil field water supply</u> 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 <u>Lawn and garden only</u> 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
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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 6 Asbestos-Cement 9 Other (specify below)	CASING JOINTS: Glued ..... Clamped ..... Welded ..... Threaded .....
Blank casing diameter ... <u>5</u> in. to ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft. Casing height above land surface ... <u>3 ft. below</u> in., weight ... lbs./ft. Wall thickness or gauge No. ....	TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS	7 PVC 10 Asbestos-cement 11 Other (specify) ..... 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 2 Louvered shutter 4 Key punched	5 Gauzed wrapped 8 Saw cut 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) .....	11 None (open hole)
SCREEN-PERFORATED INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft. GRAVEL PACK INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft.		

6 GROUT MATERIAL: <u>1 Neat cement</u> 2 Cement grout 3 Bentonite 4 Other .....
Grout Intervals: From ... <u>6</u> ft. to ... <u>3</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 11 Fuel storage 15 <u>Oil well/Gas well</u> 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage
Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
95	50	Sand			
50	6	Clay			
6	3	Cement			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) <u>plugged</u> under my jurisdiction and was completed on (mo/day/year) <u>9/10/85</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>186</u> . This Water Well Record was completed on (mo/day/yr) <u>11/30/85</u> under the business name of <u>Kelly's Water Well Service</u> by (signature) <u>[Signature]</u>
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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 R E/W SEC.