

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Edwards		SE 1/4 NW 1/4 SW 1/4		35		T 26 S		R 20 E (W)	
Distance and direction from nearest town or city street address of well if located within city?									
Approximately 9 3/4 miles north of Mullinville									
2 WATER WELL OWNER: Indian Hills Agriculture, LLC									
RR#, St. Address, Box # : 8441 E. 32nd - Suite 200									
City, State, ZIP Code : Wichita, KS 67226									
Board of Agriculture, Division of Water Resources									
Application Number: 24,217									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 212 ft. ELEVATION: unknown							
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.							
		WELL'S STATIC WATER LEVEL 65.6 ft. below land surface measured on mo/day/yr 4-29-05							
		Pump test data: Well water was not checked ft. after _____ hours pumping _____ gpm							
		Est. Yield unknown gpm: Well water was _____ ft. after _____ hours pumping _____ gpm							
		Bore Hole Diameter: 26 in. to 212 ft., and _____ in. to _____ ft.							
WELL WATER TO BE USED AS:									
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well									
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____									
Water Well Disinfected? Yes _____ No <input checked="" type="checkbox"/>									
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 <input checked="" type="checkbox"/> _____ _____ 7 Fiberglass _____ Threaded _____									
Blank casing diameter 16 in. to 75 ft., Dia 16 in. to 171 ft., Dia _____ in. to _____ ft.									
Casing height above land surface 12 in., weight 36.87 lbs./ft. Wall thickness or gauge No .219									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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) Bridge Slot _____ ft.									
SCREEN-PERFORATED INTERVALS: From 75 ft. to 115 ft., From _____ ft. to _____ ft.									
From 171 ft. to 211 ft., From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From 21 ft. to 212 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 21 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) _____ _____ _____ _____ 13 Insecticide storage None known									
Direction from well? _____ How many feet? _____									
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS				
0	1	Topsoil	211	212	Clay				
1	15	Sand, fine, medium							
15	31	Clay, sandy with sand streaks							
31	50	Sand and gravel, fine, medium							
50	96	Sand and gravel, fine, medium, coarse, very coarse							
96	102	Clay, brown							
102	111	Sand and gravel, fine, medium							
111	140	Clay, white							
140	150	Clay, tan							
150	176	Clay, gray							
176	178	Sand, fine							
178	186	Sand and gravel, fine, medium, coarse							
186	191	Clay, sandy with sand streaks							
191	211	Sand and gravel, fine, medium							
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) 4-29-05 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) 5-5-05 under the business name of Clarke Well & Equipment, Inc. 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 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.									