

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number				
County: Gray		NW 1/4 SE 1/4 NE 1/4	11	T 26 S	R 28 EW				
Distance and direction from nearest town or city street address of well if located within city? 210 East Ave. A., Cimarron, Kansas									
2 WATER WELL OWNER: Grasser Oil Co. RR#, St. Address, Box # : 210 East Ave., A. City, State, ZIP Code : Cimarron, KS 67835 Board of Agriculture, Division of Water Resources Application Number:									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 63 ft. ELEVATION:							
<div style="text-align: center;">N 1 Mile W E S</div> <table border="1" style="margin: auto; text-align: center;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table>		NW	NE	SW	SE	Depth(s) Groundwater Encountered 1. 35 ft. 2. ft. 3. ft.			
		NW	NE						
		SW	SE						
		WELL'S STATIC WATER LEVEL 35.6 ft. below land surface measured on mo/day/yr 12-3-93							
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 10.25 in. to 65 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 PPW-1							
		Was a chemical/bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/> X; If yes, mo/day/yr sample was submitted							
		Water Well Disinfected? Yes <input checked="" type="checkbox"/> No							
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					
7 Fiberglass				Threaded <input checked="" type="checkbox"/> X					
Blank casing diameter 5.0 in. to 33 ft. Dia in. to ft. Dia in. to ft.									
Casing height above land surface 0.0 in., weight lbs./ft. Wall thickness or gauge No. Schedule 40									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement		11 Other (specify)							
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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)		6 Wire wrapped 9 Drilled holes							
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From 63 ft. to 33 ft. From ft. to ft.									
From ft. to ft. From ft. to ft.									
GRAVEL PACK INTERVALS: From 63 ft. to 30 ft. From ft. to 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 30 ft. to 27 ft. From 27 ft. to 0.0 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		15 Oil well/Gas well							
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	PLUGGING INTERVALS				
0	5	Clay light brown							
5	10	Clay light brown							
10	15	Clay light brown							
15	20	Clay light brown slightly silty							
20	25	Clay light brown slightly silty - slight odor							
25	30	Clay gray with odor							
30	35	Clay dark gray silty very strong odor							
35	40	Sand, medium to large grain, unconsolidated gravel small to large saturated							
40	45	Sand, medium to large grain, unconsolidated gravel small to large saturated							
45	50	Sand, medium to large grain, unconsolidated gravel small to large saturated							
Flush mount approved by Don Taylor (10-14-93) KDHE Project Code #01035354									
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) 11-16-93 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 540 This Water Well Record was completed on (mo/day/yr) 12/15/93 under the business name of Prairie Land Environmental Remediation, INC (signature) <i>[Signature]</i>									
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.									

OFFICE USE ONLY

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