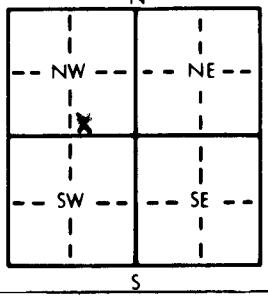


1 LOCATION OF WATER WELL:		Fraction SW $\frac{1}{4}$ SE $\frac{1}{4}$ NW $\frac{1}{4}$	Section Number 11	Township Number T 26 S	Range Number R 28 NW
Distance and direction from nearest town or city street address of well if located within city?					
2 WATER WELL OWNER:		Vernon Hanna			
RR#, St. Address, Box #		256			
City, State, ZIP Code		Cimarron, Kansas 67835			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:					
		4 DEPTH OF COMPLETED WELL..... ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1..... ft. 2..... ft. 3..... ft.			
		WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr			
		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 TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well			
		6 Domestic 3 Feedlot 9 Dewatering 12 Other (Specify below)			
		7 Irrigation 4 Industrial 8 Lawn and garden only 10 Monitoring 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:		5 Wrought iron 1 Steel 2 PVC	8 Concrete tile 9 Other (specify below)	CASING JOINTS: Glued Clamped	
		6 Asbestos-Cement 4 ABS	7 Fiberglass	Welded Threaded.....	
Blank casing diameter in. to ft., Dia		in. to ft., Dia	in. to ft., Dia	in. to ft.	
Casing height above land surface 10 in., weight		lbs./ft. Wall thickness or gauge No.			
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC 5 Fiberglass 6 Concrete tile	10 Asbestos-cement 11 Other (specify)	11 None (open hole)	
1 Steel 2 Brass		3 Stainless steel 4 Galvanized steel	8 RMP (SR) 9 ABS	12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped 6 Wire wrapped 7 Torch cut	8 Saw cut 9 Drilled holes 10 Other (specify)	11 None (open hole)	
1 Continuous slot 2 Louvered shutter		3 Mill slot 4 Key punched			
SCREEN-PERFORATED INTERVALS: From..... ft. to ft., From..... ft. to ft.				ft. to ft.	
From..... ft. to ft., From..... ft. to ft.				ft. to ft.	
GRAVEL PACK INTERVALS: From..... ft. to ft., From..... ft. to ft.				ft. to ft.	
From..... ft. to ft., From..... ft. to ft.				ft. to ft.	
6 GROUT MATERIAL: 1 Neat cement		2 Cement grout	3 Bentonite	4 Other	
Grout Intervals: From..... ft. to ft., From..... ft. to ft.				ft. to ft., From..... ft. to ft.	
What is the nearest source of possible contamination:		7 Pit privy 8 Sewage lagoon 9 Feedyard	10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage	14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)	
1 Septic tank 2 Sewer lines 3 Watertight sewer lines		4 Lateral lines 5 Cess pool 6 Seepage pit			
Direction from well?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	Packed clay			
10	15	Clay & bentonite mixed			
15	20	Fill sand & bentonite mixed			
20	26	Bentonite			
The well had collapsed at 26 ft.					
The casing was 14" steel					
There was a 42" cement pit					
from 0-20 ft. We removed the pit from 7-10 ft.					
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) 3-1-90 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 179 This Water Well Record was completed on (mo/day/yr) 4-12-90 under the business name of Joe's Well Service, Inc. Cimarron, Ks. by (signature) <i>Justine Cisek</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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.					