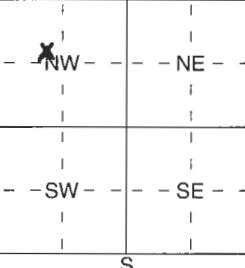


1	LOCATION OF WATER WELL: County: <i>Gray</i>	Fraction <i>SE 1/4 SE 1/4 NW 1/4</i>	Section Number <i>6</i>	Township Number <i>T 26 S</i>	Range Number <i>R 28 EW</i>
Distance and direction from nearest town or city street address of well if located within city? <i>From Ingalls, 1 1/2 miles east on Hwy 50</i>					
2	WATER WELL OWNER: <i>Rachel O'Neal</i>	RR#, St. Address, Box # : <i>P.O. Box 665</i>	Board of Agriculture, Division of Water Resources Application Number:		
3	City, State, ZIP Code : <i>Cimarron, KS 67835</i>				
4	LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	DEPTH OF COMPLETED WELL <i>180</i> ft. ELEVATION:			
	Depth(s) Groundwater Encountered <i>1</i> ft.	ft. 2 <i>2</i> ft.	ft. 3 <i>3</i> ft.		
	WELL'S STATIC WATER LEVEL <i>70</i> ft. below land surface measured on mo/day/yr	<i>5-7-04</i>			
	Pump test data: Well water was ft. after hours pumping gpm				
	Est. Yield gpm: Well water was ft. after hours pumping gpm				
	WELL WATER TO BE USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Domestic (lawn & garden) 8 Air conditioning 9 Dewatering 10 Monitoring well 11 Injection well 12 Other (Specify below) <i>None</i>				
	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 <input checked="" type="checkbox"/> No				
5	TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS	5 Wrought iron 6 Asbestos-Cement 7 Fiberglass	8 Concrete tile 9 Other (specify below)	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped Welded Threaded	
	Blank casing diameter <i>5</i> in. to <i>160</i> ft., Dia in. to ft., Dia in. to ft.				
	Casing height above land surface <i>12</i> in., weight				lbs./ft. Wall thickness or guage No. <i>SPR 21</i>
	TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless Steel 4 Galvanized Steel	5 Fiberglass 6 Concrete tile	7 PVC 8 RMP (SR) 9 ABS	10 Asbestos-Cement 11 Other (Specify) 12 None used (open hole)	
	SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched	5 Guazed wrapped 6 Wire wrapped 7 Torch cut	8 Saw cut 9 Drilled holes 10 Other (specify)	11 None (open hole) ft.	
	SCREEN-PERFORATED INTERVALS: From <i>160</i> ft. to <i>180</i> ft., From ft. to ft.				
	From ft. to ft., From ft. to ft.				
	GRAVEL PACK INTERVALS: From <i>20</i> ft. to <i>180</i> ft., From ft. to ft.				
	From ft. to ft., From ft. to ft.				
6	GROUT MATERIAL: 1 Neat cement Grout Intervals: From <i>0</i> ft. to <i>20</i> ft., From ft. to ft., From ft. to ft.	2 Cement grout	3 Bentonite	4 Other	
	What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit	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) <i>In pasture</i>	
	Direction from well?	How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<i>0</i>	<i>2</i>	<i>Top soil</i>			
<i>2</i>	<i>20</i>	<i>Brown clay</i>			
<i>20</i>	<i>52</i>	<i>Course Sand</i>			
<i>52</i>	<i>53</i>	<i>Sandrock</i>			
<i>53</i>	<i>62</i>	<i>Course Sand</i>			
<i>62</i>	<i>78</i>	<i>Brown Sandy clay</i>			
<i>78</i>	<i>88</i>	<i>Course Sand</i>			
<i>88</i>	<i>90</i>	<i>Sandrock</i>			
<i>90</i>	<i>109</i>	<i>Course Sand</i>			
<i>109</i>	<i>110</i>	<i>Sandrock</i>			
<i>110</i>	<i>115</i>	<i>Brown clay</i>			
<i>115</i>	<i>140</i>	<i>Course sand</i>			
<i>140</i>	<i>148</i>	<i>brown sandy clay</i>			
<i>148</i>	<i>180</i>	<i>Course sand</i>			

RECEIVED

OCT 11 2004

BUREAU OF WATER

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) *5-7-04* and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's Licence No. *S-33* This Water Well Record was completed on (mo/day/yr) *10-6-04* by (signature) *[Signature]*

under the business name of *Jantzen Water Well Repair* 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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.