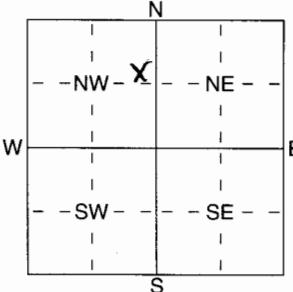


1 LOCATION OF WATER WELL:	Fraction County: <u>Grant</u>	Section Number <u>SE 1/4 NE 1/4 NW 1/4</u>	Township Number <u>11</u>	Range Number <u>T 26 S R 28 E/W</u>
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Distance and direction from nearest town or city street address of well if located within city?

402 W Ave A2 WATER WELL OWNER: Jake Osborn Well Service, Inc.Attn: Jake OsbornRR#, St. Address, Box # PO. Box 492City, State, ZIP Code Cimarron, KS 67835Board of Agriculture, Division of Water Resources  
Application Number:3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL 160 ft. ELEVATION: .....Depth(s) Groundwater Encountered 1 ~45 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

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 Domestic (lawn &amp; garden) 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes ..... No X; If yes, mo/day/yr sample was submittedWater Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ..... Clamped .....

1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....

2 PVC

4 ABS

7 Fiberglass ..... Threaded XBlank casing diameter 2 in. to 160 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.Casing height above land surface -3 in., weight 0.8 lbs./ft. Wall thickness or guage No. Sch 40 PVCTYPE OF SCREEN OR PERFORATION MATERIAL: PVC 10 Asbestos-Cement

1 Steel 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 11 Other (Specify) .....

2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 5 Glazed wrapped 8 Saw cut 11 None (open hole)

1 Continuous slot Mill slot 6 Wire wrapped 9 Drilled holes 10 Other (specify) .....

2 Louvered shutter

4 Key punched 7 Torch cut

SCREEN-PERFORATED INTERVALS: From 30 ft. to 160 ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 28 ft. to 160 ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other .....Grout Intervals: From 1 ft. to 28 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well

1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 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 Last Site .....

Direction from well? How many feet?

FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS

0 0.5 Concrete0.5 13 Clay, some silt, moist13 15 Sandy clay, moist15 36 Clay, moist36 160 Gravelly sand, fine to gravel, dryMW 127 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) 31/24/05 and this record is true to the best of my knowledge and belief. KansasWater Well Contractor's Licence No 3394 This Water Well Record was completed on (mo/day/yr) 5/19/05under the business name of Corance Great Plains, Inc. by (signature) E.J. St. JohnINSTRUCTIONS: 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.