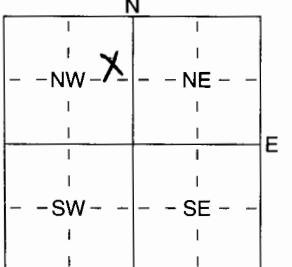


1	LOCATION OF WATER WELL:	Fraction County: <i>Great Gray</i>	SE $\frac{1}{4}$ NE $\frac{1}{4}$ NW $\frac{1}{4}$	Section Number 11	Township Number T 26 S	Range Number R 28 E/W																																				
Distance and direction from nearest town or city street address of well if located within city? <i>402 W Ave A</i>																																										
2	WATER WELL OWNER:	Jake Osborn Lab Service, Inc. Attn: Jake Osborn P.O. Box 492 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 ..... <i>60</i> ft. ELEVATION: .....																																								
Depth(s) Groundwater Encountered 1 <i>~45</i> 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 & garden) 10 <i>Monitoring well</i> .....																																										
Was a chemical/bacteriological sample submitted to Department? Yes ..... No <i>X</i> ; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes <i>No</i>																																										
5	TYPE OF BLANK CASING USED:	1 Steel <i>PVC</i>	3 RMP (SR)	5 Wrought iron 6 Asbestos-Cement 7 Fiberglass	8 Concrete tile 9 Other (specify below)	CASING JOINTS: Glued ..... Clamped ..... Welded ..... Threaded <i>X</i>																																				
Blank casing diameter ..... <i>2</i> in. to ..... <i>60</i> ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft. Casing height above land surface ..... <i>-3</i> in., weight ..... <i>0.8</i> lbs./ft. Wall thickness or guage No. <i>Sch 40 PVC</i>																																										
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 10 Asbestos-Cement 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RMP (SR) 11 Other (Specify) 12 None used (open hole)																																										
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot <i>3 Mill slot</i> 5 Guazed 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) ..... ft.																																										
SCREEN-PERFORATED INTERVALS: From ..... <i>30</i> ft. to ..... <i>60</i> ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft. GRAVEL PACK INTERVALS: From ..... <i>28</i> ft. to ..... <i>60</i> ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft.																																										
6	GROUT MATERIAL:	1 Neat cement Grout Intervals: From ..... <i>1</i> ft. to ..... <i>28</i> ft.	2 Cement grout From ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.	3 <i>Bentonite</i> 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage	4 Other ..... 14 Abandoned water well 15 Oil well/Gas well 16 Other (Specify below) <i>Last Site</i>																																					
What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 2 Sewer lines 5 Cess pool 8 Sewage lagoon 3 Watertight sewer lines 6 Seepage pit 9 Feedyard How many feet?																																										
Direction from well? <table border="1"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td><i>0</i></td> <td><i>0.5</i></td> <td><i>Concrete</i></td> <td></td> <td></td> <td></td> </tr> <tr> <td><i>0.5</i></td> <td><i>30</i></td> <td><i>Clay, moist</i></td> <td></td> <td></td> <td></td> </tr> <tr> <td><i>30</i></td> <td><i>35</i></td> <td><i>Silty clay, moist</i></td> <td></td> <td></td> <td></td> </tr> <tr> <td><i>35</i></td> <td><i>49</i></td> <td><i>Sand with gravel, fine to gravel</i></td> <td></td> <td></td> <td></td> </tr> <tr> <td><i>49</i></td> <td><i>60</i></td> <td><i>Gravel, wet, medium to gravel</i></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p style="text-align: right;"><i>MW19</i></p>							FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	<i>0</i>	<i>0.5</i>	<i>Concrete</i>				<i>0.5</i>	<i>30</i>	<i>Clay, moist</i>				<i>30</i>	<i>35</i>	<i>Silty clay, moist</i>				<i>35</i>	<i>49</i>	<i>Sand with gravel, fine to gravel</i>				<i>49</i>	<i>60</i>	<i>Gravel, wet, medium to gravel</i>			
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7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed, or (3) plugged under my jurisdiction and was																																									

MW14

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) 3/24/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 594 This Water Well Record was completed on (mo/day/yr) 5/19/05 under the business name of Landowner by (signature) PS

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.