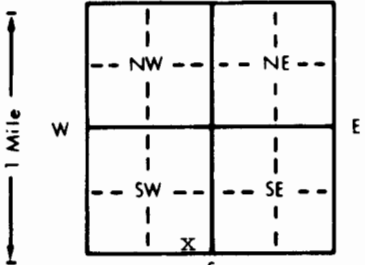


1 LOCATION OF WATER WELL: County: <u>Pratt</u>	Fraction <u>SE 1/4 SE 1/4 SW 1/4</u>	Section Number <u>2</u>	Township Number <u>T 27 S</u>	Range Number <u>R 12 E/W</u>
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Distance and direction from nearest town or city street address of well if located within city?

Approximately 2 1/2 miles south and 2 1/2 miles west of Preston

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	<u>Terry Studer</u> <u>Route 1 - Box 120</u> <u>Preston, KS 67569</u>	Board of Agriculture, Division of Water Resources Application Number: <u>39,970</u>
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL: <u>135</u> ft. ELEVATION: <u>unknown</u>
	Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL <u>35.80</u> ft. below land surface measured on mo/day/yr <u>11-6-96</u> Pump test data: Well water was <u>not ch'd</u> ft. after _____ hours pumping _____ gpm Est. Yield <u>unknown</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter <u>6 3/4</u> in. to <u>136</u> 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) <u>Observation Well</u> 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> _____; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No <u>X</u> _____

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped _____
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below) _____ Welded _____
2 PVC	4 ABS	7 Fiberglass	Threaded _____
Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft.			
Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. _____			
TYPE OF SCREEN OR PERFORATION MATERIAL:	7 PVC	10 Asbestos-cement	
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
SCREEN OR PERFORATION OPENINGS ARE:	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify) _____
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other <u>Bentonite Holeplug</u>
Grout Intervals: From _____ ft. to _____ 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	<u>None known</u>
Direction from well?	How many feet?			

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	Topsoil	135	136	Shale, red, hard
5	8	Clay, brown, sandy, hard			
8	15	Clay, tan, sandy, hard			
15	34	Sand and gravel, coarse, medium, fine			
34	39	Clay, tan, hard			
39	47	Sand and gravel, coarse, medium, fine			
47	53	Clay, white, hard			
53	55	Cemented sand			
55	58	Clay, tan, hard			
58	103	Sand and gravel, medium and fine			
103	120	Sand and gravel, coarse, medium, fine			
120	135	Clay, tan and white, hard			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>11-6-96</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>185</u> This Water Well Record was completed on (mo/day/yr) <u>11-13-96</u> under the business name of <u>Clarke Well &amp; Equipment, Inc.</u> by (signature) <u>Charles W. Clarke</u>
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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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R  
EW  
SEC  
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1/4  
1/4