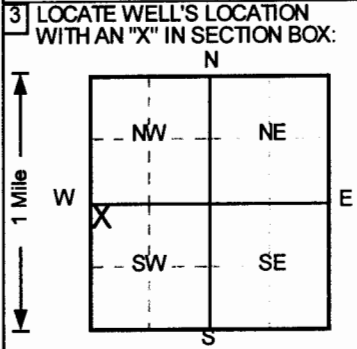


1 LOCATION OF WATER WELL: Fraction NW 1/4 NW 1/4 SW 1/4 Section Number 34 Township Number T 27 S Range Number R 13 **EW**

Distance and direction from nearest town or city street address of well if located within city?
165' East of Hwy 281 & Green St.

2 WATER WELL OWNER: **Western Light & Telephone Co.**
 RR#, St. Address, Box # : **102 Green** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **Pratt, Kansas 67124** Application Number:



4 DEPTH OF COMPLETED WELL **75** ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. **0** ft. 2. **0** ft. 3. **0** ft.
 WELL'S STATIC WATER LEVEL . . . **62.19** . . . ft. below land surface measured on mo/day/yr . . . **6/12/95** . . .
 Pump test data: Well water was . . . **NA** . . . ft. after hours pumping gpm
 Est. Yield . . **NA** . . . gpm: Well water was ft. after hours pumping gpm
 Bore Hole Diameter . . . **8** . . . in. to . . . **7.5** . . . ft., and **0** . . . in. to . . . **0** . . . 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)
 2 Irrigation 4 Industrial 7 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 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.
 Blank casing diameter **2** in. to **5.5** ft., Dia in. to ft., Dia in. to ft.
 Casing height above land surface **0** in., weight lbs./ft. Wall thickness or gauge No. . . . **Sch. 40**
 TYPE OF SCREEN OR PERFORATION MATERIAL **7** 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 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 **55** ft. to **75** ft., From ft. to ft.
 From ft. to ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From **53** ft. to **75** ft., From ft. to ft.
 From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement **2** Cement grout **3** Bentonite 4 Other
 Grout Intervals: From **0** ft. to **51** ft., From **51** ft. to **53** ft., From ft. to ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage **16** Other (specify below)
 **UST**
 Direction from well? How many feet? **0**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Topsoil, Dark Brown			
1	5	Clay, Dark Brown			
5	7	Clay, Light Yellow Orange			
7	10	Sand, Light Orange Yellow			
10	16	Sand, Light Yellow Brown			
16	18	Sand, Light Yellow Brown			
18	25	Sand, Light Yellow Brown mottled with Dark			
25	27	Clay Seam, Medium Brown			
27	40	Sand, Brite Orange yellow			
40	42	Sand, Light Yellow Brown			
42	46.5	Sand, Light Yellow-Brown			
46.5	47	Clay Seam, Light Brown			
47	60	Sand, Light Yellow Brown			MW4 , Tag # 117625 , Flush Mount
60	75	Sand, Light Yellow Orange Brown			Project Name: Western Lite -Telephone Co.
					GeoCore # 144 , KDHE # U1076900

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) **6/12/95** and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. **527** This Water Well Record was completed on (mo/day/yr) **7/7/95**
 under the business name of **GeoCore Services, Inc.** by (signature) *Dee Koff*

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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