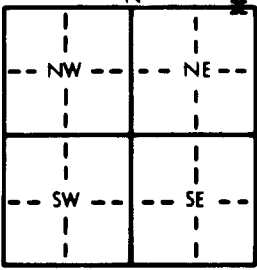


1 LOCATION OF WATER WELL: Fraction **Ne 1/4 NE 1/4 NE 1/4** Section Number **25** Township Number **T 27 S** Range Number **R 1-2 17 EW**  
 County: **kiowa**

Distance and direction from nearest town or city street address of well if located within city?  
**1 West 1/4 4 North of Haviland, Kans.**

2 WATER WELL OWNER: **Phillip Rush**  
 RR#, St. Address, Box #: **Haviland Kansas** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
  
 4 DEPTH OF COMPLETED WELL: **100** ft. ELEVATION:  
 Depth(s) Groundwater Encountered 1 **49** ft. 2 **49** ft. 3 **49** ft.  
 WELL'S STATIC WATER LEVEL **49** ft. below land surface measured on mo/day/yr **3/20/87**  
 Pump test data: Well water was **49** ft. after **4** hours pumping **3** gpm  
 Est. Yield **25** gpm: Well water was **49** ft. after **4** hours pumping **3** gpm  
 Bore Hole Diameter **8 3/4** in. to **100** ft. and **100** in. to **100** ft.  
 WELL WATER TO BE USED AS:  
 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well  
 Was a chemical/bacteriological sample submitted to Department? Yes  No  If yes, mo/day/yr sample was submitted

5 TYPE OF BLANK CASING USED:  
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued  Clamped   
 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded   
 7 Fiberglass Threaded   
 Blank casing diameter **5** in. to **80** ft., Dia. **80** in. to **80** ft., Dia. **80** in. to **80** ft.  
 Casing height above land surface **24** in., weight **SDR 26** lbs./ft. Wall thickness or gauge No. **26**  
 TYPE 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 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)

6 GROUT MATERIAL:  Neat cement 2 Cement grout 3 Bentonite 4 Other  
 Grout Intervals: From **-2** ft. to **20** ft., From **20** ft. to **100** ft., From **100** ft. to **100** 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 **Pasture**

Direction from well? **All around** How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Top Soil			
2	12	Silt and Sand			
12	15	Gray Clay			
15	75	Sand			
75	100	Sand and Gravel			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was  constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **3/20/87** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **224** This Water Well Record was completed on (mo/day/yr) **6/15/87** under the business name of **Carl Hays Water Well Service** by (signature) *Carl Hays*

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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T R EW SEC.