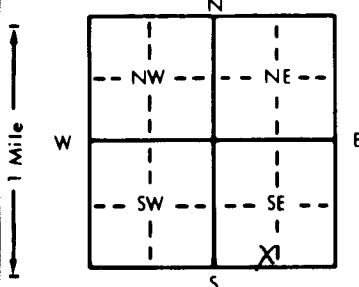


1 LOCATION OF WATER WELL: Fraction SE 1/4 SW 1/4 SE 1/4 Section Number 33 Township Number T 27 S Range Number R 18 E/W
 County: Rowley

Distance and direction from nearest town or city street address of well if located within city?
2 miles North, 1/4 mile East of Greensburg

2 WATER WELL OWNER: David White
 RR#, St. Address, Box #: Rt 1 box 112 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Greensburg Kansas 67054 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: 110 ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. 49' ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 49' ft. below land surface measured on mo/day/yr 5-1-2000
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ gpm; Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: 8 3/4 in. to 110 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)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well Livestock
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes X No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
2 PVC 4 ABS 7 Fiberglass Threaded _____
 Blank casing diameter 5 in. to 100 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface 16 in. weight _____ lbs./ft. Wall thickness or gauge No. SDR-26

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) _____
 9 ABS 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 Mill slot 5 Gauzed 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) _____

SCREEN-PERFORATED INTERVALS: From 100 ft. to 110 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 21 ft. to 110 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 1 ft. to 21 ft., From _____ ft. to _____ 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)
 13 Insecticide storage
 Direction from well? West How many feet? 1320

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>3</u>	<u>Silt & Sand</u>			
<u>3</u>	<u>21</u>	<u>Gray Clay</u>			
<u>21</u>	<u>37</u>	<u>Tan Clay</u>			
<u>37</u>	<u>110</u>	<u>Sand & Gravel</u>			

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) 5-1-2000 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 653 This Water Well Record was completed on (mo/day/yr) 6-10-2000 under the business name of Don Hayse Water Well Service by (signature) Don Hayse

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
T
R
EW
SEC.