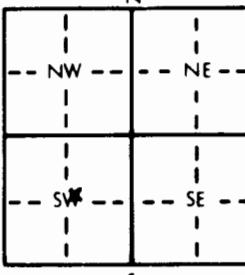


1 LOCATION OF WATER WELL:		Fraction SW $\frac{1}{4}$	NE $\frac{1}{4}$	SW $\frac{1}{4}$	Section Number 22	Township Number T 27 S	Range Number R 28 E
Distance and direction from nearest town or city street address of well if located within city? <i>From Steplight in Cimarron 8 miles south on 23 Hwy. 1/2 miles west, and 1/2 mile south</i>							
2 WATER WELL OWNER:		Pete Koch					
RR#, St. Address, Box #:		P.O. Box 86					
City, State, ZIP Code:		Cimarron, KS 67835					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:							
		4 DEPTH OF COMPLETED WELL 180' ft. ELEVATION: Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL 128' ft. below land surface measured on mo/day/yr 4-20-93 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 in. to 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 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:							
<input checked="" type="checkbox"/> 1 Steel <input type="checkbox"/> 2 PVC		<input type="checkbox"/> 3 RMP (SR) <input type="checkbox"/> 4 ABS		5 Wrought iron 8 Concrete tile 6 Asbestos-Cement 9 Other (specify below)		CASING JOINTS: Glued Clamped Welded Threaded	
Blank casing diameter 16" in. to ft., Dia in. to ft., Dia in. to ft.							
Casing height above land surface. 36" in., weight lbs./ft. Wall thickness or gauge No.							
6 TYPE OF SCREEN OR PERFORATION MATERIAL:							
<input checked="" type="checkbox"/> 1 Steel <input type="checkbox"/> 2 Brass		<input type="checkbox"/> 3 Stainless steel <input type="checkbox"/> 4 Galvanized steel		5 Fiberglass 7 PVC 6 Concrete tile		10 Asbestos-cement 11 Other (specify) 12 None used (open hole)	
7 SCREEN OR PERFORATION OPENINGS ARE:							
<input type="checkbox"/> 1 Continuous slot <input type="checkbox"/> 2 Louvered shutter		<input type="checkbox"/> 3 Mill slot <input type="checkbox"/> 4 Key punched		5 Gauzed wrapped 8 Saw cut 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) NA		11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.							
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.							
8 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Intervals: From 3' ft. to 6' ft., From ft. to ft., From ft. to ft.							
9 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)							
10 Direction from well? How many feet?							
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS	
				180'	128'	Chlorinated sand	
				128'	6'	Subsoil	
				6'	3"	Bentonite chips	
						Cement Cap over borehole	
11 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) 4-20-93 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 533 This Water Well Record was completed on (mo/day/yr) 5-11-93 under the business name of <u>Tankers Water Well Reps.</u> by (signature) <u>ECG</u>							
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.							