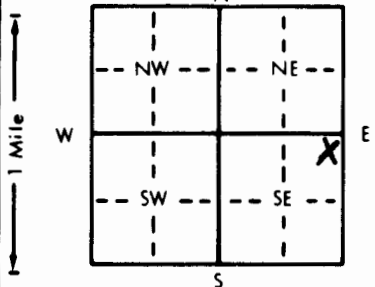


1 LOCATION OF WATER WELL: Fraction **NE 1/4 NE 1/4 SE 1/4** Section Number **32** Township Number **T 27 S** Range Number **R 34W EW**  
 County: **HASKELL**

Distance and direction from nearest town or city street address of well if located within city?  
**FROM SUBLETTE: NORTH TO HITCH FEEDERS SIGN, WEST TO CHURCH, 1 WEST, 1 1/2 SOUTH & WEST INTO LOC.**

2 WATER WELL OWNER: **MINTER WILSON**  
 RR#, St. Address, Box #: **P.O. BOX 669** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: **ULYSSES, KS 67880** Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
  
 4 DEPTH OF COMPLETED WELL: **395** ft. ELEVATION:  
 Depth(s) Groundwater Encountered 1. **305** ft. 2. ft. 3. ft.  
 WELL'S STATIC WATER LEVEL: **305** ft. below land surface measured on **04-30-96**  
 Pump test data: Well water was **50** ft. after **1** hours pumping **40** gpm  
 Est. Yield **40** gpm: Well water was ft. after hours pumping gpm  
 Bore Hole Diameter: **11** in. to **395** ft., and in. to ft.  
 WELL WATER TO BE USED AS:  
 1 Domestic  2 Irrigation  3 Feedlot  4 Industrial  5 Public water supply  6 Oil field water supply  7 Lawn and garden only  8 Air conditioning  9 Dewatering  10 Monitoring well  11 Injection well  12 Other (Specify below)  
 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:  
 1 Steel  2 PVC  3 RMP (SR)  4 ABS  5 Wrought iron  6 Asbestos-Cement  7 Fiberglass  8 Concrete tile  9 Other (specify below)  
 Blank casing diameter: **6** in. to **395** ft., Dia. in. to ft., Dia. in. to ft.  
 Casing height above land surface: **24** in., weight **2.902** lbs./ft. Wall thickness or gauge No. **.280 SDR 21**

TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel  2 Brass  3 Stainless steel  4 Galvanized steel  5 Fiberglass  6 Concrete tile  7 PVC  8 RMP (SR)  9 ABS  10 Asbestos-cement  11 Other (specify)  12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:  
 1 Continuous slot  2 Louvered shutter  3 Mill slot  4 Key punched  5 Gauzed wrapped  6 Wire wrapped  7 Torch cut  8 Saw cut  9 Drilled holes  10 Other (specify)  11 None (open hole)

SCREEN-PERFORATED INTERVALS: From **295** ft. to **395** ft., From ft. to ft., From ft. to ft., From ft. to ft.  
 GRAVEL PACK INTERVALS: From **200** ft. to **395** 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 **HOLE PLUG**  
 Grout intervals: From **0** ft. to **16** ft., From ft. to ft., From ft. to ft., From ft. to ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank  2 Sewer lines  3 Watertight sewer lines  4 Lateral lines  5 Cess pool  6 Seepage pit  7 Pit privy  8 Sewage lagoon  9 Feedyard  10 Livestock pens  11 Fuel storage  12 Fertilizer storage  13 Insecticide storage  14 Abandoned water well  15 Oil well/Gas well  16 Other (specify below)

Direction from well?			How many feet?		
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	TOP SOIL	397	420	SANDY CLAY & CLAY
2	26	SANDY CLAY			
26	68	FINE SAND			
68	83	SANDY CLAY & CLAY			
83	109	SAND			
109	131	SANDY CLAY & SAND			
131	172	SAND			
172	193	CLAY & SAND			
193	217	SAND			
217	304	SAND			
304	332	CLAY & SAND STREAKS			
332	341	SAND			
341	352	CLAY			
352	390	SAND			
390	397	SAND & CLAY STREAKS			

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) **04-30-96** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **KWCL-430** This Water Well Record was completed on (mo/day/yr) **04-30-96** under the business name of **HOWARD DRUG CO. BOX 806 BEAVER, OK 73932** by (signature) *Howard Drug Co.*

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.

22916