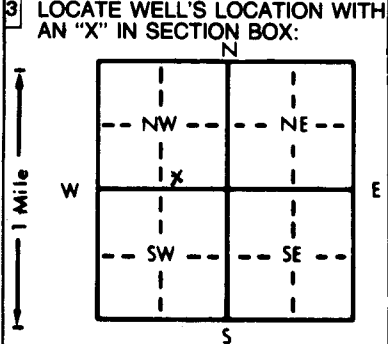


1 LOCATION OF WATER WELL: Fraction SE 1/4 SW 1/4 NW 1/4 Section Number 26 Township Number T 27 S Range Number R 39 E

Distance and direction from nearest town or city street address of well if located within city?
12 mi. East 6 1/2 mi North 1/4 mile East of Johnson

2 WATER WELL OWNER: Gary Hurst
 RR#, St. Address, Box #: Rte 7
 City, State, ZIP Code: Johnson Mo 67855
 Board of Agriculture, Division of Water Resources
 Application Number: 005 691



4 DEPTH OF COMPLETED WELL... 215 ft. ELEVATION: 3300
 Depth(s) Groundwater Encountered 1. none ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL dry ft. below land surface measured on mo/day/yr
 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 30 in. to _____ ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 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 Observation well plug
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No ; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes _____ No dry

5 TYPE OF BLANK CASING USED:
 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
 Fiberglass Threaded _____
 Blank casing diameter 16 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 8 in., weight _____ lbs./ft. Wall thickness or gauge No. 3/16
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement
 Brass 4 Galvanized steel 6 Concrete tile 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 Torch cut 9 Drilled holes 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From Top ft. to Bottom ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From 3.5 ft. to 7 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: from top
 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 Feedyard 12 Fertilizer storage 16 Other (specify below) _____
 13 Insecticide storage _____
 Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
7'	215'	clay cement grout in casing and bore hole			
3.5'	7'				

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 5/10/91 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) _____ under the business name of _____ by (signature) Gary Hurst

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.