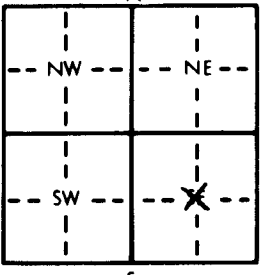


1 LOCATION OF WATER WELL: County: Pratt		Fraction $\frac{1}{4}$ $\frac{1}{4}$ CSE $\frac{1}{4}$	Section Number 23	Township Number T 28 S	Range Number R 13 EW
Distance and direction from nearest town or city street address of well if located within city? 35 1/4 E 1/4 N OF PRATT, KS					
2 WATER WELL OWNER: Dietz Trust		RR#, St. Address, Box #: Pratt Kansas			
City, State, ZIP Code:		Board of Agriculture, Division of Water Resources Application Number: 34,905			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"></div>		4 DEPTH OF COMPLETED WELL: 180 ft. ELEVATION: Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL: 97 ft. below land surface measured on mo/day/yr 29 OCT 83 Pump test data: Well water was 108 ft. after 8 hours pumping 800 gpm Est. Yield _____ gpm: Well water was 111.5 ft. after 1 hours pumping 1000 gpm Bore Hole Diameter: 30 in. to 180 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) <input checked="" type="checkbox"/> Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____			
5 TYPE OF BLANK CASING USED: <input checked="" type="radio"/> Steel 3 RMP (SR) 2 PVC 4 ABS		5 Wrought iron 8 Concrete tile 6 Asbestos-Cement 9 Other (specify below) 7 Fiberglass		CASING JOINTS: Glued _____ Clamped _____ Welded <input checked="" type="checkbox"/> Threaded _____	
Blank casing diameter 16 in. to 120 ft., Dia _____ in. to _____ ft. Casing height above land surface: 12 in., weight 36.91 lbs./ft. Wall thickness or gauge No. 219		TYPE OF SCREEN OR PERFORATION MATERIAL: <input checked="" type="radio"/> Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____ 12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 2 Louvered shutter <input checked="" type="radio"/> Key punched		5 Gauzed wrapped 8 Saw cut 11 None (open hole) 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) _____			
SCREEN-PERFORATED INTERVALS: From 120 ft. to 180 ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.		GRAVEL PACK INTERVALS: From 10 ft. to 180 ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.			
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> Bentonite 4 Other _____		Grout Intervals: From 0 ft. to 10 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 2 Sewer lines 5 Cess pool 8 Sewage lagoon 3 Watertight sewer lines 6 Seepage pit 9 Feedyard		10 Livestock pens 14 Abandoned water well 11 Fuel storage 15 Oil well/Gas well 12 Fertilizer storage 16 Other (specify below) NONE 13 Insecticide storage			
Direction from well?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Soil, top			
2	14	Clay, tan			
14	20	Clay, brown			
20	55	Clay, tan and caliche			
55	61	Sand, fine to coarse and fine to med gravel			
61	72	Clay, tan			
72	94	Sand, fine to coarse and fine to med gravel			
94	107	Clay, tan and yellow, sandy			
107	180	Sand, fine to coarse and fine to very coarse gravel			
180	192	Clay, tan and brown			
192	210	Shale, red			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="radio"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 12 DEC 83 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 325 This Water Well Record was completed on (mo/day/yr) 15 FEB 84 under the business name of Central Well & Pump Inc. by (signature) <i>[Signature]</i> 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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					