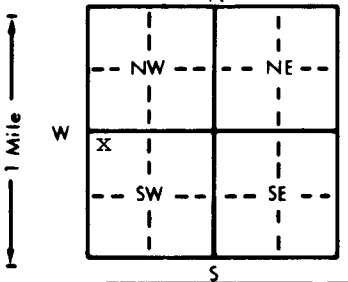
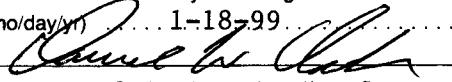


1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Pratt		NW ¼ NW ¼ SW ¼		14		T 28 S		R 14 E/W	
Distance and direction from nearest town or city street address of well if located within city? Approximately 4 miles east and 1½ miles south of Cullison									
2 WATER WELL OWNER:		Rick Lambert							
RR#, St. Address, Box # :		13947 NW Sun City Rd.							
City, State, ZIP Code :		Coats, KS 67028							
		Board of Agriculture, Division of Water Resources Application Number: 42,757							
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 184 ft. ELEVATION: unknown							
		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.							
		WELL'S STATIC WATER LEVEL ... 71 ... ft. below land surface measured on mo/day/yr ... 1-11-99							
		Pump test data: Well water was not ch'd. ft. after .... hours pumping .... gpm							
		Est. Yield unknown gpm: Well water was .... ft. after .... hours pumping .... gpm							
		Bore Hole Diameter ... 24 ... in. to ... 185 ... 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 ..... X ..... If yes, mo/day/yr sample was submitted							
		Water Well Disinfected? Yes ..... No ..... X							
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 ... 16 ... in. to ... 123 ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft.									
Casing height above land surface ... 12 ... in., weight ... 16, 15 ... lbs./ft. Wall thickness or gauge No. ... 500									
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC 10 Asbestos-cement							
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) ...									
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped 8 Saw cut 11 None (open hole)							
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes									
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) ...									
SCREEN-PERFORATED INTERVALS: From ... 123 ... ft. to ... 183 ... ft., From ... ft. to ... ft.									
GRAVEL PACK INTERVALS: From ... 20 ... ft. to ... 185 ... ft., From ... ft. to ... ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other									
Grout Intervals: From ... 0 ... ft. to ... 20 ... ft., From ... ft. to ... ft., From ... ft. to ... ft.									
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well							
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well									
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)									
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage None known									
Direction from well?		How many feet?							
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS				
0	3	Topsoil							
3	27	Clay, brown, caliche							
27	51	Sand and gravel, fine, medium, coarse							
51	75	Clay, brown, few gravel streaks							
75	120	Sand and gravel, fine, medium, coarse							
120	121	Clay, brown							
121	183	Sand and gravel, fine, medium, coarse							
183	185	Clay, brown							
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) ... 1-11-99 ... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ... 185 ... This Water Well Record was completed on (mo/day/yr) ... 1-18-99 ... under the business name of Clarke Well & Equipment, Inc. by (signature) 									
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.									