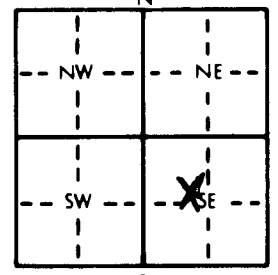


1 LOCATION OF WATER WELL: County: **KIOWA** Fraction: **SE 1/4 NW 1/4 SE 1/4** Section Number: **16** Township Number: **T 28 S** Range Number: **R 18 E**

Distance and direction from nearest town or city street address of well if located within city?
89.2' N. OF KANSAS AVE, 0.4' E 163.9' W. OF OAK ST & GREENSBURG, KS.

2 WATER WELL OWNER: **FARMERS GRAIN & SUPPLY**
 RR#, St. Address, Box #: **102 E 10TH ST KANSAS**
 City, State, ZIP Code: **GREENSBURG, KS 67045**
 Board of Agriculture, Division of Water Resources
 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

 4 DEPTH OF COMPLETED WELL: **90.25** ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.
 WELL'S STATIC WATER LEVEL: **80.47** ft. below land surface measured on **11/8/95**
 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: **7.578** in. to **90.25** 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** **MW 10**
 Was a chemical/bacteriological sample submitted to Department? Yes.....No. **X**.....; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes **(No)**

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded
2 PVC 4 ABS 7 Fiberglass **Threaded**
 Blank casing diameter: **2** in. to **65.0** ft., Dia. in. to ft., Dia. in. to ft.
 Casing height above land surface: in., weight lbs./ft. Wall thickness or gauge No. **Sched 40**
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 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** 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)
 SCREEN-PERFORATED INTERVALS: From **65** ft. to **90** ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From **62.95** ft. to **90.25** ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout **3 Bentonite** 4 Other
 Grout Intervals: From **10** ft. to **60.50** 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 **11 Fuel storage** 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below)
 Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0'	2'	Topsoil, DK Brn, OKSAIL			
2'	12'	CLAY, DK Brn			
12'	19'	Silt, Red Brn, SANDY (P-M)			
19'	29'	CLAY, Brn, Silty			
29'	41'	SILT, Brn, CLAYEY, W/ SAND (VP)			
41'	51'	SILT, Brn, SANDY (VA-P)			
51'	60'	CLAY, Brn, SANDY (P) w/ calc. cl.			
60'	70'	SAND, Brn, (P) w/ MINOR CLAY			
70'	90.25'	SAND, Brn, (P-C) w/ pebbles			

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) **10/18/95** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **483** This Water Well Record was completed on (mo/day/yr) **12/26/95** under the business name of **TEST** by (signature) **[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.

OFFICE USE ONLY
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