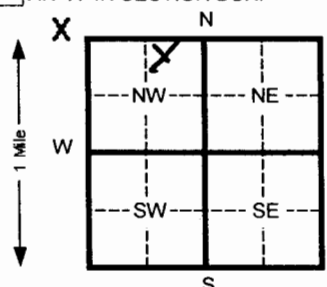


1 LOCATION OF WATER WELL: Fraction **NW 1/4 NE 1/4 NW 1/4** Section Number **7** Township Number **T 28 S** Range Number **R 27 EW**
 County: **Gray**
 Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: **Dodge City Coop % Terry Cramer** Board of Agriculture, Division of Water Resources
 RR#, St. Address, Box #: **Hwy 56** Application Number:
 City, State, ZIP Code: **Haggard, KS 67901** **MW-11**

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

 4 DEPTH OF COMPLETED WELL **220'** ft. ELEVATION: **2776.92**
 Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL **201.08** ft. below land surface measured on **mo/day/yr** **6/17/04**
 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 **8** in. to **220** ft. and _____ in. to _____ ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 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:
 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
 2 **PVC** 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded **X**
 Blank casing diameter **4** in. to **180** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **0** in., weight **2.071** lbs./ft. Wall thickness or gauge No. **237**
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 7 **PVC** 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____
 9 ABS 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 **Saw cut** 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From **180** ft. to **220** ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **177** ft. to **220** 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 _____
 Grout Intervals From **0** ft. to **177** 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 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 9 Feedyard 12 Fertilizer storage 16 Other (specify below) _____
 13 Insecticide storage **Contaminated Site**
 Direction from well? _____ How many feet? _____

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2		Surface	164	177	Clay, Caliche, & Sandstone
2	3		Fine Sand	177	191	Sandy Clay, Fine Sand & s.caliche
3	15		Clay	191	202	Clay
15	50		Clay & Caliche	202	211	Clay w/a few Caliche Strks
50	56		Fine Sand w/Sandy Clay & Caliche	211	216	Clay w/Sandstone Strks
				216	220	Caliche w/Sandy Clay
56	74		Sandy Clay W/caliche & a few Sandy Streaks			
74	76		Sandy Clay w/lots of Caliche			
76	86		Sandy Clay			
86	109		Sandy Clay w/Caliche			
109	118		Caliche & Clay			
118	135		Clay w/Caliche Strks			
135	164		Clay w/lots of Caliche			

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/yr) **7-1-04** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **554** This Water Well Record was completed on (mo/day/yr) **8-2-04** under the business name of **Woofer Pump & Well, Inc.** by (signature) *Jay G. Woofer*
 INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send 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.