

<b>1 LOCATION OF WATER WELL:</b>		Fraction <b>SW ¼ SE ¼ NW ¼</b>		Section Number <b>12</b>	Township Number <b>T 28 S</b>	Range Number <b>R 33 E/N</b>																																																																																																									
County: <b>Haskell</b>		Distance and direction from nearest town or city street address of well if located within city?																																																																																																													
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RR#, St. Address, Box #: <b>HCR1, Box 20J</b>		Board of Agriculture, Division of Water Resources																																																																																																													
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		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL <b>380</b> 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 <b>8</b> in. to <b>520</b> 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 <b>X</b> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes <b>X</b> No _____																																																																																																													
		<b>5 TYPE OF BLANK CASING USED:</b> 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued <b>X</b> Clamped _____ 2 <b>PVC</b> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____ Blank casing diameter <b>4.5</b> in. to <b>415</b> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Casing height above land surface <b>18</b> in., weight <b>2.38</b> lbs./ft. Wall thickness or gauge No. <b>.248</b>																																																																																																													
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<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>CODE</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>3</td> <td></td> <td>Surface</td> <td>23</td> <td>239</td> <td>Tan shale</td> </tr> <tr> <td>3</td> <td>20</td> <td></td> <td>Louess</td> <td>239</td> <td>239.5</td> <td>Hard cemented sand</td> </tr> <tr> <td>20</td> <td>60</td> <td></td> <td>Clay</td> <td>239.5</td> <td>245</td> <td>Sandy clay</td> </tr> <tr> <td>60</td> <td>75</td> <td></td> <td>Sandy clay &amp; caliche</td> <td>245</td> <td>246</td> <td>Hard cemented sand</td> </tr> <tr> <td>75</td> <td>90</td> <td></td> <td>Med sand &amp; gravel w/clay &amp; cal.</td> <td>246</td> <td>248</td> <td>Sandy clay</td> </tr> <tr> <td>90</td> <td>118</td> <td></td> <td>Med sand &amp; gravel w/rocks,</td> <td>248</td> <td>263</td> <td>Ochre &amp; gray shale</td> </tr> <tr> <td></td> <td></td> <td></td> <td>Loose</td> <td>263</td> <td>281</td> <td>Soft sticky clay</td> </tr> <tr> <td>118</td> <td>120</td> <td></td> <td>Clay</td> <td>281</td> <td>297</td> <td>Sandy clay</td> </tr> <tr> <td>120</td> <td>124</td> <td></td> <td>Med sand &amp; gravel, loose</td> <td>297</td> <td>303</td> <td>Fine sand w/clay</td> </tr> <tr> <td>124</td> <td>130</td> <td></td> <td>Hard cemented sand</td> <td>303</td> <td>318</td> <td>Sandy clay w/some fine sd &amp; caliche</td> </tr> <tr> <td>130</td> <td>145</td> <td></td> <td>Med sand &amp; gravel, loose</td> <td>318</td> <td>323</td> <td>Fine to med sand w/clay</td> </tr> <tr> <td>145</td> <td>148</td> <td></td> <td>Cemented sand</td> <td>323</td> <td>326</td> <td>Sandy clay w/some sand</td> </tr> <tr> <td>148</td> <td>226</td> <td></td> <td>Med sd &amp; gravel w/caliche lense</td> <td>326</td> <td>344</td> <td>Semi tight fine to med sd w/clay lense</td> </tr> <tr> <td>226</td> <td>235</td> <td></td> <td>Med sand &amp; gravel w/clay</td> <td></td> <td></td> <td>See page 2 of 2</td> </tr> </tbody> </table>							FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	3		Surface	23	239	Tan shale	3	20		Louess	239	239.5	Hard cemented sand	20	60		Clay	239.5	245	Sandy clay	60	75		Sandy clay & caliche	245	246	Hard cemented sand	75	90		Med sand & gravel w/clay & cal.	246	248	Sandy clay	90	118		Med sand & gravel w/rocks,	248	263	Ochre & gray shale				Loose	263	281	Soft sticky clay	118	120		Clay	281	297	Sandy clay	120	124		Med sand & gravel, loose	297	303	Fine sand w/clay	124	130		Hard cemented sand	303	318	Sandy clay w/some fine sd & caliche	130	145		Med sand & gravel, loose	318	323	Fine to med sand w/clay	145	148		Cemented sand	323	326	Sandy clay w/some sand	148	226		Med sd & gravel w/caliche lense	326	344	Semi tight fine to med sd w/clay lense	226	235		Med sand & gravel w/clay			See page 2 of 2
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<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) _____ 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) <i>Jay G. Wood</i>																																																																																																															
<b>INSTRUCTIONS:</b> Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.																																																																																																															

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1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <b>Haskell</b>		<b>SW</b> $\frac{1}{4}$ <b>SE</b> $\frac{1}{4}$ <b>NW</b> $\frac{1}{4}$	<b>12</b>	<b>T 28 S</b>	<b>R 33 E</b>
Distance and direction from nearest town or city street address of well if located within city?					
2 WATER WELL OWNER: <b>Dennis Hill</b>					
RR#, St. Address, Box #: <b>HCR1, Box 20J</b>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code: <b>Sublette, Ks 67877</b>			Application Number: <b>20050245</b>		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <b>515</b> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.			
		WELL'S STATIC WATER LEVEL <b>380</b> 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 <b>8</b> in. to <b>520</b> 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 <b>X</b> If yes, mo/day/yr sample was submitted _____					
Water Well Disinfected? Yes <b>X</b> No _____					
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued <b>X</b> Clamped _____
2 PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass	Threaded _____		
Blank casing diameter <b>4.5</b> in. to <b>415</b> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height above land surface <b>18</b> in., weight <b>2.38</b> lbs./ft. Wall thickness or gauge No. <b>.248</b>					
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	5 Gauzed wrapped	8 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 <b>415</b> ft. to <b>515</b> ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <b>20</b> ft. to <b>515</b> ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____					
Grout Intervals From <b>0</b> ft. to <b>20</b> 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	<b>Oil well</b>
Direction from well? _____ How many feet? _____					
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
344	350		Sandy clay w/sand strks		
350	385		Fine to med sand w/clay lenses		
385	395		Sandy clay w/med sand strks		
395	402		Fine to med sand w/caliche		
			Layers		
402	417		Gray shale		
417	445		Sticky sandy clay w/sine fine sd		
445	462		Fine sand w/clay & gray shale		
			Layers		
462	470		Sticky sandy clay w/some sd		
470	490		Fine sand w/clay		
490	500		Clay		
500	510		Fine sand w/clay		
510	520		clay		
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) <b>8-25-05</b> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <b>554</b>			This Water Well Record was completed on (mo/day/yr) <b>9-02-05</b>		
under the business name of <b>Woolter Pump &amp; Well Inc.</b>			by (signature) <i>[Signature]</i>		
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment/ Bureau of Water, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-6545. Send one to WATER WELL OWNER and retain one for your records.					

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