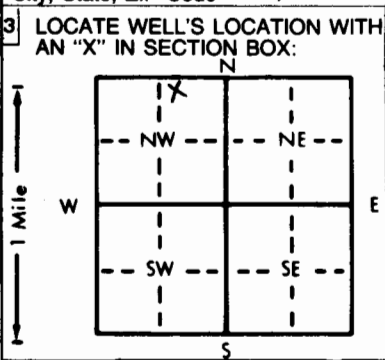


1 LOCATION OF WATER WELL: Fraction NW 1/4 NE 1/4 NW 1/4 Section Number 27 Township Number T 28 S Range Number R 37 **W**

County: GRANT
 Distance and direction from nearest town or city street address of well if located within city?
Main & Hwy 160, Ulysses Kansas MW4

2 WATER WELL OWNER: BONNIE WILINGER
 RR#, St. Address, Box #: RURAL ROUTE, JOHNSON, Kansas
 City, State, ZIP Code: _____
 Board of Agriculture, Division of Water Resources
 Application Number: _____



4 DEPTH OF COMPLETED WELL: 89 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 70 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 75.20 ft. below land surface measured on mo/day/yr 8/2/95
 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 8.6 in. to 89 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 (No)

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 _____
 Blank casing diameter 2 in. to 64 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface Flush mount in., weight 0.7 lbs./ft. Wall thickness or gauge No. Sch 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 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 64 ft. to 89 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 62 ft. to 89 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 to 62 ft., From 60 to 89 ft., From 60 to 62 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
 Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	.3	Concrete			cont
.3	5	V.D. Brown, clayey silt, moist and soft			Loose, sub rnd, moist and well graded.
5	15	D Brn, clayey silt, moist & soft	70	88	Sand, tan, med to fine grain, well graded, sub rnd and wet
15	20	Silt, with clay, moist & soft			
20	25	Sand, tan, fine grain, well sorted moist, sub rnd.	88	90	Clay brown, moist, slightly stiff and plastic
25	35	Clayey silt, grey, moist and soft			
35	40	A/A becoming damp w/ calcium pad			
40	45	Clayey silt, tan, loose & moist			
45	50	Silt, tan, loose, damp			
50	70	Clayey silt, tan, loose, damp w/ fine grain sand lenses water bedded. Sand, tan, fine			

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) 7/27/95 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) 8/16/95 under the business name of Maxim Technologies by (signature) William J. Purdon

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.