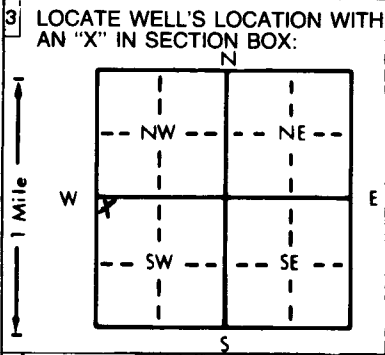


1 LOCATION OF WATER WELL: County: <b>Stanton</b>	Fraction <b>NW 1/4 NW 1/4 SW 1/4</b>	Section Number <b>2</b>	Township Number <b>T 28 S</b>	Range Number <b>R 39 E/W</b>
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Distance and direction from nearest town or city street address of well if located within city?  
**4 1/2 miles north of the Big Bow/hwy 160 intersection**

2 WATER WELL OWNER: **Robert Seger**  
 RR#, St. Address, Box # : **RFD**  
 City, State, ZIP Code : **Johnson, Kansas 67855**  
 Board of Agriculture, Division of Water Resources  
 Application Number:



4 DEPTH OF COMPLETED WELL: **340** ft. ELEVATION: **slope**  
 Depth(s) Groundwater Encountered 1. **235** ft. 2. **235** ft. 3. **235** ft.  
 WELL'S STATIC WATER LEVEL **235** ft. below land surface measured on mo/day/yr **11/19/91**  
 Pump test data: Well water was **238** ft. after **6** hours pumping **10** gpm  
 Est. Yield **45** gpm: Well water was **238** ft. after **6** hours pumping **10** gpm  
 Bore Hole Diameter: **9 7/8** in. to **340** ft., and **340** in. to **340** ft.  
 WELL WATER TO BE USED AS:  
 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   
 5 Public water supply  8 Air conditioning  11 Injection well

Was a chemical/bacteriological sample submitted to Department? Yes  No  X  
 If yes, mo/day/yr sample was submitted: \_\_\_\_\_  
 Water Well Disinfected? Yes  X No

5 TYPE OF BLANK CASING USED:  
 1 Steel  3 RMP (SR)  5 Wrought iron  8 Concrete tile  CASING JOINTS: Glued  X & riveted   
 2 PVC  4 ABS  6 Asbestos-Cement  9 Other (specify below)  Welded   
 7 Fiberglass  Threaded   
 Blank casing diameter **5** in. to **260** ft., Dia **5** in. to **320** ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface **18** in., weight **schedule 200** lbs./ft. Wall thickness or gauge No. \_\_\_\_\_  
 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  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 **260** ft. to **280** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From **320** ft. to **340** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 GRAVEL PACK INTERVALS: From **24** ft. to **340** 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 **4** ft. to **24** 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? **east** How many feet? **200**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Surface			
2	90	Brown clay w/sand strips			
90	150	Brown clay			
150	165	Coarse sanc			
165	185	Brown clay			
185	220	Sandy clay			
220	230	Coarse sand			
230	255	Sandy clay			
255	285	Coarse sand			
285	305	Clay			
305	325	Sand w/clay breakers			
325	342	Sandrock			
342	345	Tight 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/year) **November 19, 1991** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **164**. This Water Well Record was completed on (mo/day/yr) **December 3, 1991** under the business name of **Houck Bros. Drlg. Co.** by (signature) *M. Beard*

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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.