1 LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number County: King M 1 1 5W 1/4 NE 1/4 5W 1/4

Distance and direction from nearest town or city street address of well if located within city? 3 Mi Eret Murdon 2 WATER WELL OWNER: Graves Drilling Co. Inc. Board of Agriculture, Division of Water Resources 916 Union Cut WICKITZ, K NF --Est. Yield . /. 0.0 .4 gpm: \_Well water was ..... ft. after ..... hours pumping ..... gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning ★Oil field water supply 1 Domestic 3 Feedlot 9 Dewatering 12 Other (Specify below) 7 Lawn and garden only 10 Observation well 2 Irrigation 4 Industrial Was a chemical/bacteriological sample submitted to Department? Yes.......No...X ....; If yes, mo/day/yr sample was sub-Water Well Disinfected? Yes TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued . X. . . Clamped . . . . . 3 RMP (SR) 1 Steel 6 Asbestos-Cement 9 Other (specify below) Welded . . . . . . . . . . . . . . . . **★**PVC 4 ABS 7 Fiberglass Blank casing diameter . . /. J. O. . . . . . in. to Casing height above land surface..... 2. TYPE OF SCREEN OR PERFORATION MATERIAL: **★**PVC 10 Asbestos-cement 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped Saw cut 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 4 Key punched 7 Torch cut 2 Louvered shutter SCREEN-PERFORATED INTERVALS: GRAVEL PACK INTERVALS: XNeat cement 2 Cement grout 3 Bentonite What is the nearest source of possible contamination: 14 Abandoned water well 10 Livestock pens 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage Oil well/Gas well 5 Cess pool 8 Sewage lagoon 16 Other (specify below) 2 Sewer lines 12 Fertilizer storage 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage Direction from well? How many feet? FROM LITHOLOGIC LOG **FROM** LITHOLOGIC LOG 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or 💓 plugged under my jurisdiction and was Water Well Contractor's License No. . . . . . . . . . . . . This Water Well Record was completed on (mo/day/yr) by (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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL