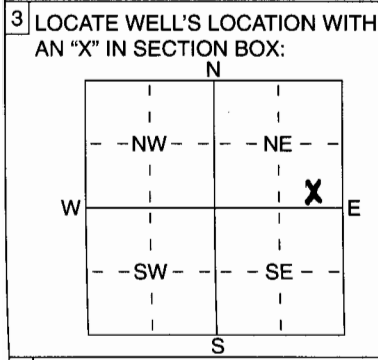


1 LOCATION OF WATER WELL: County: Haskell	Fraction SE ¼ SE ¼ NE ¼	Section Number 27	Township Number T 29 S	Range Number R 32 EW
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Distance and direction from nearest town or city street address of well if located within city? **Sublette Ks: 2 East on Hwy 54 and South at car dealership, 2nd St, South, then West to end of street (drill at red stake)**

2 WATER WELL OWNER: **SW Windmill Johan Loewen**
 RR#, St. Address, Box # : **P.O. Box 909**
 City, State, ZIP Code : **Meade, Ks. 67864**
 Board of Agriculture, Division of Water Resources
 Application Number: _____



4 DEPTH OF COMPLETED WELL **500** ft. ELEVATION:

Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft.
 WELL'S STATIC WATER LEVEL **330** ft. below land surface measured on mo/day/yr **7-31-04**

Pump test data: Well water was ft. after hours pumping gpm
 Est. Yield gpm: Well water was ft. after hours pumping gpm

WELL WATER TO BE USED AS:

<input checked="" type="radio"/> 1 Domestic	<input type="radio"/> 3 Feedlot	<input type="radio"/> 5 Public water supply	<input type="radio"/> 8 Air conditioning	<input type="radio"/> 11 Injection well
<input type="radio"/> 2 Irrigation	<input type="radio"/> 4 Industrial	<input type="radio"/> 6 Oil field water supply	<input type="radio"/> 9 Dewatering	<input type="radio"/> 12 Other (Specify below)
		<input type="radio"/> 7 Domestic (lawn & garden)	<input type="radio"/> 10 Monitoring well	

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

5 TYPE OF BLANK CASING USED:

<input type="radio"/> 1 Steel	<input type="radio"/> 3 RMP (SR)	<input type="radio"/> 5 Wrought iron	<input type="radio"/> 8 Concrete tile	CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped
<input checked="" type="radio"/> 2 PVC	<input type="radio"/> 4 ABS	<input type="radio"/> 6 Asbestos-Cement	<input type="radio"/> 9 Other (specify below)	<input type="checkbox"/> Welded
		<input type="radio"/> 7 Fiberglass		<input type="checkbox"/> Threaded

Blank casing diameter **5** in. to **4.40** ft. Dia in. to ft. Dia in. to ft.
 Casing height above land surface **24** in., weight **3.604** lbs./ft. Wall thickness or gauge No. **SDR21.316**

TYPE OF SCREEN OR PERFORATION MATERIAL:

<input type="radio"/> 1 Steel	<input type="radio"/> 3 Stainless Steel	<input type="radio"/> 5 Fiberglass	<input checked="" type="radio"/> 7 PVC	<input type="radio"/> 10 Asbestos-Cement
<input type="radio"/> 2 Brass	<input type="radio"/> 4 Galvanized Steel	<input type="radio"/> 6 Concrete tile	<input type="radio"/> 8 RMP (SR)	<input type="radio"/> 11 Other (Specify)
			<input type="radio"/> 9 ABS	<input type="radio"/> 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

<input type="radio"/> 1 Continuous slot	<input type="radio"/> 3 Mill slot	<input type="radio"/> 5 Gauzed wrapped	<input checked="" type="radio"/> 8 Saw cut	<input type="radio"/> 11 None (open hole)
<input type="radio"/> 2 Louvered shutter	<input type="radio"/> 4 Key punched	<input type="radio"/> 6 Wire wrapped	<input type="radio"/> 9 Drilled holes	
		<input type="radio"/> 7 Torch cut	<input type="radio"/> 10 Other (specify)	ft.

SCREEN-PERFORATED INTERVALS: From **440** ft. to **500** ft., From ft. to ft.
 From ft. to ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From **260** ft. to **500** 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 **hole plug**

Grout Intervals: From **1** ft. to **25** ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination:

<input type="radio"/> 1 Septic tank	<input type="radio"/> 4 Lateral lines	<input type="radio"/> 7 Pit privy	<input type="radio"/> 10 Livestock pens	<input type="radio"/> 14 Abandoned water well
<input type="radio"/> 2 Sewer lines	<input type="radio"/> 5 Cess pool	<input type="radio"/> 8 Sewage lagoon	<input type="radio"/> 11 Fuel storage	<input type="radio"/> 15 Oil well/Gas well
<input type="radio"/> 3 Watertight sewer lines	<input type="radio"/> 6 Seepage pit	<input type="radio"/> 9 Feedyard	<input type="radio"/> 12 Fertilizer storage	<input type="radio"/> 16 Other (specify below)
			<input type="radio"/> 13 Insecticide storage	

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Surface	400	450	Clay
2	50	Clay	450	457	Sand
50	70	Sandy clay	457	461	Sandy clay
70	146	Sand	461	473	Sand
146	150	Clay	473	493	Clay "tan"
150	161	Sand	493	500	Shale "black"
161	305	Sand and clay streaks			
305	318	Sand			
318	333	Sand			
333	362	Clay			
362	368	Clay and sand streaks			
368	376	Sand			
376	382	Sand and clay streaks			
382	400	Sandy clay			

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 BUREAU OF WATER

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) **7-31-04** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No **KWWCL-430** This Water Well Record was completed on (mo/day/yr) **7-31-04** under the business name of **Howard Drlg. Co. Box 806 Beaver, Ok 73932** by (signature) *Paul Howard*

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.