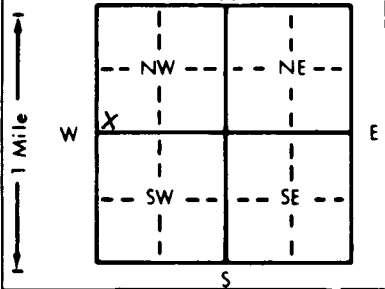


1 LOCATION OF WATER WELL: Fraction SW 1/4 SW 1/4 NW 1/4 Section Number 25 Township Number T 2 S Range Number R 22 EW
 County: NORTON

Distance and direction from nearest town or city street address of well if located within city?
SW CORNER OF HWY 383 AND COUNTY ROAD IN CALVERT, KS

2 WATER WELL OWNER: CALVERT STATION
 RR#, St. Address, Box # : 6201 N. HWY 61 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : ALMENA, KS Application Number: MW-12

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: 37 ft. ELEVATION: _____ ft.
 Depth(s) Groundwater Encountered 1. 29 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 29.04 ft. below land surface measured on mo/day/yr 2/22/96
 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. 8.25 in. to 37.5 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 ✓; If yes, mo/day/yr sample was sub-
 mitted _____ Water Well Disinfected? Yes _____ No ✓

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
 1 Steel 3 RMP (SR) Welded _____
2 PVC 4 ABS 7 Fiberglass Threaded
 Blank casing diameter 2 in. to 22 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 0 in., weight _____ lbs./ft. Wall thickness or gauge No. _____
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From 37 ft. to 22 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 37.5 ft. to 21 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 2 Neat cement 2 Cement grout 3 Bentonite 4 Other CONCRETE
 Grout Intervals: From 21 ft. to 19 ft., From 19 ft. to 1 ft., From 1 ft. to 0 ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below) _____

Direction from well? SW How many feet? 300'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0'	37.5'	BROWN SILTY, CLAY, NO ODOR			

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) 2/20/96 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 507 This Water Well Record was completed on (mo/day/yr) 2/28/96 under the business name of KANSAS CITY TESTING LAB by (signature) [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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.