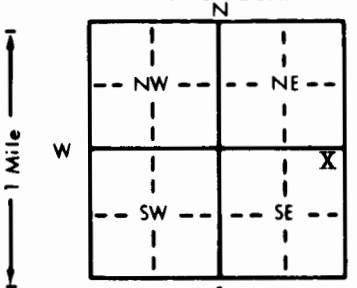


1 LOCATION OF WATER WELL: County: **NORTON** Fraction: **NE 1/4 NE 1/4 SE 1/4** Section Number: **35** Township Number: **T 2 S** Range Number: **R 25 W E/W**

Distance and direction from nearest town or city street address of well if located within city?  
**11 MILES WEST, 3/4 MILE NORTH FROM NORTON, KANSAS**

2 WATER WELL OWNER: **A & N FARMS, INC.**  
 RR#, St. Address, Box #: **RR2 BOX 19** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: **NORTON KS 67654** Application Number: **20607**

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

 4 DEPTH OF COMPLETED WELL: **220** ft. ELEVATION: .....  
 Depth(s) Groundwater Encountered 1. **105** ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL **105** ft. below land surface measured on mo/day/yr **05-20-2007**  
 Pump test data: Well water was **210** ft. after **6** hours pumping **550** gpm  
 Est. Yield **550** gpm: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Bore Hole Diameter **28** in. to **218** ft., and ..... in. to ..... 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  
 Was a chemical/bacteriological sample submitted to Department? Yes ..... No **X**; If yes, mo/day/yr sample was submitted  
 Water Well Disinfected? Yes ..... 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 **X**  
 7 Fiberglass Threaded .....  
 Blank casing diameter **16** in. to **120** ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface **12** in., weight ..... lbs./ft. Wall thickness or gauge No. ....  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 11 Other (specify) .....  
 2 Brass 4 Galvanized steel 6 Concrete tile 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 **120** ft. to **220** ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From **20** ft. to **220** 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 **20** ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... 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? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	TOP SOIL	168	170	CLAY & GRAVEL
2	4	CLAY	170	175	GRAVEL & SAND
4	26	YELLOW CLAY	175	184	CLAY & SAND
26	55	SANDSTONE & SAND	184	190	SAND - GRAVEL - SAND STONE
55	62	CLAY - MAGSTRIPS	190	195	SAND & SAND STONE
62	70	GRAY SANDSTONE & LIME ROCK	195	210	SAND & GRAVEL
70	73	CLAY	210	218	CLAY - OCHRE
73	76	SANDSTONE - SANDY CLAY	218	219	FLINT LAYER
76	95	MEDIUM SAND	219	240	OGHRE - SHALE
95	99	CLAY - GRAVEL			
99	120	CLAY - GRAVEL STRIPS MOSTLY			
120	124	CLAY - GRAVEL			
124	135	GRAVEL & SAND			
135	150	CLAY - SANDY CLAY			
150	168	SANDSTONE - CLAY STRIPS			

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) **MAY 17, 2007** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **722** This Water Well Record was completed on (mo/day/yr) **SEPTEMBER 11, 2007** under the business name of **WESTERN SPRINKLERS, INC.** by (signature) *Paul W. Milbo*

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.