

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number			
County: Meade		NW 1/4 NW 1/4 SW 1/4		4		T 30 S		R 26 E			
Distance and direction from nearest town or city street address of well if located within city?											
Approx. 3/4 mile east and 5 1/2 miles north of Fowler											
2 WATER WELL OWNER: Erma Lee Smith											
RR#, St. Address, Box # : 2148 Melrose Court					Board of Agriculture, Division of Water Resources						
City, State, ZIP Code : Norman, Okla. 73069					Application Number: ME-04						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:					4 DEPTH OF COMPLETED WELL: 289 ft. ELEVATION:						
<div><div>1 Mile</div><div><div>N</div><div>W</div><div>E</div><div>S</div></div><div><div>NW</div><div>NE</div><div>SW</div><div>SE</div></div><div>X</div></div>					Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.						
					WELL'S STATIC WATER LEVEL .98. ft. below land surface measured on mo/day/yr 10/12/90						
					Pump test data: Well water was .220. ft. after .4. hours pumping 1670. gpm						
					Est. Yield 1650. gpm: Well water was ft. after hours pumping gpm						
					Bore Hole Diameter. . . 24. . . in. to . . . 28.9. . . 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. X. If yes, mo/day/yr sample was submitted											
Water Well Disinfected? Yes No X											
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 . . . 28.9. . . ft., Dia. in. to ft., Dia. in. to ft.											
Casing height above land surface. . . 12. . . in., weight . . . 36.91. . . lbs./ft. Wall thickness or gauge No. . . 21.9w											
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 . . . 166. . . ft. to . . . 286. . . ft. From ft. to ft.											
From ft. to ft. From ft. to ft.											
GRAVEL PACK INTERVALS: From . . . 20. . . ft. to . . . 28.9. . . 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 . . . 0. . . ft. to . . . 20. . . 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 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? north How many feet? 100											
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS	
				See attached log							
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) 10/10/90 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 145. This Water Well Record was completed on (mo/day/yr) 10/31/90 under the business name of Henkle Drilling & Supply Co., Inc by (signature) Erma Lee Smith											
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.											

Henkle

DRILLING & SUPPLY CO., INC.

3795 W. JONES AVE.
316/277-2389
FAX/277-0224

P.O. Box 639
GARDEN CITY, KANSAS 67846

CUSTOMER'S NAME Larry & Ralph Sturgeon DATE July 23, 1990
STREET ADDRESS Rt. 1. Box 36-A TEST # 1 E. LOG Yes
CITY & STATE Fowler, Ks. 67844 DRILLER Shelden
COUNTY Meade QUARTER ~~34~~ 54 SECTION 4 TOWNSHIP 30 RANGE 26

LOCATION 100' south of old well - 16' west of underground line - 60' east of center
of road

[illegible]