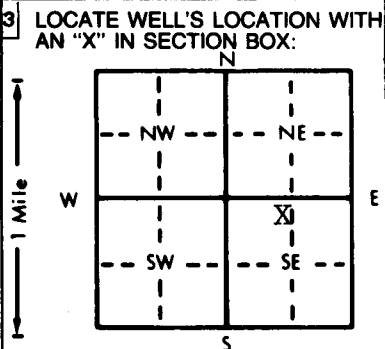


1 LOCATION OF WATER WELL: County: Grant Fraction: NE 1/4 NW 1/4 SE 1/4 Section Number: 16 Township Number: T 30 S Range Number: R 36 E/W

Distance and direction from nearest town or city street address of well if located within city?  
From Hickok - 1 Mile East, 9 Miles South, 2 Miles West, 2514 Ft. North & 1380 Ft. West

2 WATER WELL OWNER: Kan-Tex Feeders, Inc.  
 RR#, St. Address, Box #: 10925 S. Road P  
 City, State, ZIP Code: Ulysses, Kansas 67880  
 Board of Agriculture, Division of Water Resources  
 Application Number: 38779



4 DEPTH OF COMPLETED WELL: 525 ft. ELEVATION: 2656 (I3-53)  
 Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL: 225 ft. below land surface measured on mo/day/yr 9-22-93  
 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: 30 in. to 525 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 X 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 255 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface 12 in., weight 42.05 lbs./ft. Wall thickness or gauge No. 250  
 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) .....  
 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 6 Wire wrapped 9 Drilled holes  
 4 Key punched 7 Torch cut 10 Other (specify) .....  
 SCREEN-PERFORATED INTERVALS: From 255 ft. to 525 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 20 ft. to 525 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? Northeast How many feet? 180' North & 60' East

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) 10-2-93 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 208 This Water Well Record was completed on (mo/day/yr) 10-25-93 under the business name of Minter-Wilson Drilling Co., Inc. by (signature) Nora Keller

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.