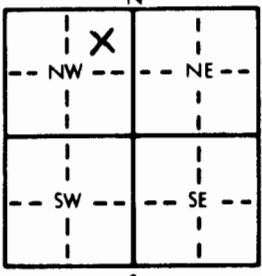


1 LOCATION OF WATER WELL: Fraction C OF NE 1/4 NW 1/4 Section Number 13 Township Number T 31 S Range Number R 12 EW
 County: Barber

Distance and direction from nearest town or city street address of well if located within city?
4N 3/8 E 1/8 S OF MEDICINE LODGE, KS

2 WATER WELL OWNER: H-30 Drilling Co.
 RR#, St. Address, Box #: 251 Water Suite 10 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Wichita, Kansas 67202 Chain Ranch B1 Application Number:

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

 4 DEPTH OF COMPLETED WELL: 33 ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. 5 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 5 ft. below land surface measured on mo/day/yr 1 July 81
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 60 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: 10 in. to 33 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 Observation well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X; If yes, mo/day/yr sample was sub-
 mitted Water Well Disinfected? Yes X No

5 TYPE OF CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing diameter 5 in. to 13 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 12 in., weight _____ lbs./ft. Wall thickness or gauge No. .214
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From 13 ft. to 33 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 10 ft. to 33 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 10 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 NONE
 Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Sandy top soil			
2	20	Sand, fine to coarse and fine gravel			
20	33	Sand, med to coarse and med gravel, silty			
33	45	Shale, red			

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) 1 July 81 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 325 This Water Well Record was completed on (mo/day/yr) 10 JUN 82 under the business name of Central Well & Pump Inc. 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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

T

31

R

12

EW

SEC

13

C 1/4

NE 1/4

NW 1/4