

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Meade	SW 1/4 SW 1/4 SW 1/4	26	T 31 S	R 27 (EW)

Distance and direction from nearest town or city street address of well if located within city?
 5 East and 2 miles North of Meade, Kansas

2 WATER WELL OWNER: Mr. John C. Thomas, DVM
 RR#, St. Address, Box # :
 City, State, ZIP Code : Meade, KS 67864
 Board of Agriculture, Division of Water Resources
 Application Number: --

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: 200... ft. ELEVATION: Slope

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
XX PVC	4 ABS	7 Fiberglass	

Blank casing diameter 5 in. to 160 ft., Dia. in. to ft., Dia. in. to ft.
 Casing height above land surface 18 in., weight 2.8 lbs./ft. Wall thickness or gauge No. 265
 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	XX 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 160 ft. to 200 ft., From ft. to ft.
 From ft. to ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From 20 ft. to 200 ft., From ft. to ft.
 From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite **XX** Other .. Baroid Hole Plug

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	XX Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage	

Direction from well? East How many feet? 100

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Topsoil			
2	73	Clay			
73	82	Med. to Lar. Sand			
82	179	Clay			
179	191	Med. to Lar. Sand & Gravel			
191	200	Clay			

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) .. August 1, 1989 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .. 252 This Water Well Record was completed on (mo/day/year) .. August 14, 1989 under the business name of FRIESEN WINDMILL & SUPPLY 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, Bureau of Water Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.

6900000088-82

OFFICE USE ONLY T R EW SEC. 1/4 1/4 1/4