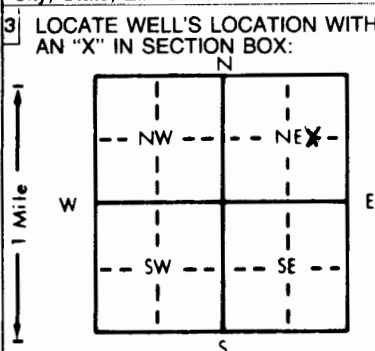


1 LOCATION OF WATER WELL: County: Seward	Fraction SW ¼ NE ¼ NE ¼	Section Number 9	Township Number T 31 S	Range Number R 34 E/W
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Distance and direction from nearest town or city street address of well if located within city?
North of Liberal to Hwy 190 go West till Hwy goes North 2 West ¼ South

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	Myers E#1 333 E. English #215 Wichita, KS 67202	Gabbert & Jones Board of Agriculture, Division of Water Resources Application Number: 910006
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4 DEPTH OF COMPLETED WELL: 240 ft. ELEVATION:	Depth(s) Groundwater Encountered 1. 140 ft. 2. _____ ft. 3. _____ ft.
WELL'S STATIC WATER LEVEL: 100 ft. below land surface measured on mo/day/yr 1-10-91	Pump test data: Well water was 90 ft. after 2 hours pumping 75 gpm
Est. Yield: 80 gpm; Well water was _____ ft. after _____ hours pumping _____ gpm	Bore Hole Diameter: 9 in. to 240 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 <u>6 Oil field water supply</u> 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:	5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____	2 PVC 4 ABS 7 Fiberglass _____ Threaded _____
Blank casing diameter: 5 in. to 140 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.	Casing height above land surface: 14 in., weight 200 lbs./ft. Wall thickness or gauge No. 0.265
TYPE OF SCREEN OR PERFORATION MATERIAL:	7 PVC 10 Asbestos-cement
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____	2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:	5 Gauzed wrapped 8 Saw cut 11 None (open hole)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes	2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____
SCREEN-PERFORATED INTERVALS: From 140 ft. to 240 ft., From _____ ft. to _____ ft.	From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 135 ft. to 240 ft., From _____ ft. to _____ ft.	From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: <u>1 Neat cement</u> 2 Cement grout 3 Bentonite 4 Other <u>Hole Plug</u>
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 <u>15 Oil well/Gas well</u>
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
13 Insecticide storage
Direction from well? Southwest How many feet? 300

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	100	Overburden			
100	240	Medium sand and gravel			

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) 1-10-91 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 142 . This Water Well Record was completed on (mo/day/yr) 1-11-91 under the business name of T & W Water Well Service, Inc. by (signature) <i>[Signature]</i>

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.

OFFICE USE ONLY T R E/W SEC. ¼ ¼ ¼ ¼