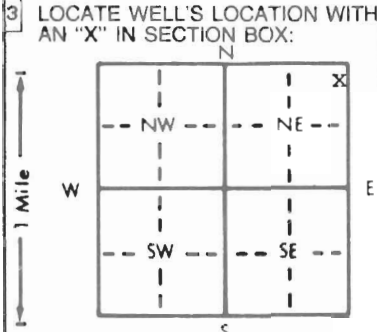


1 LOCATION OF WATER WELL: County: <b>Harper</b>	Fraction <b>NE 1/4 NE 1/4 NE 1/4</b>	Section Number <b>18</b>	Township Number <b>T 31 S</b>	Range Number <b>R 8 E</b>
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Distance and direction from nearest town or city street address of well if located within city?  
 Approximately 8 miles north of Attica

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	<b>City of Attica</b> <b>P.O. Box 421</b> <b>Attica, KS 67009</b>	<b>42,635</b> Board of Agriculture, Division of Water Resources Application Number: <del>XXXXXX XXXXX</del>
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4 DEPTH OF COMPLETED WELL: <b>124.04</b> ft. ELEVATION: <b>unknown</b>
Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.
WELL'S STATIC WATER LEVEL: <b>70</b> ft. below land surface measured on <b>mo/day/yr 12-11-97</b>
Pump test data: Well water was <b>not ch'd</b> ft. after .... hours pumping .... gpm
Est. Yield <b>unknown</b> gpm: Well water was .... ft. after .... hours pumping .... gpm
Bore Hole Diameter: <b>30</b> in. to <b>124</b> ft. and .... in. to .... ft.
WELL WATER TO BE USED AS:
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 <b>X</b> ..... If yes, mo/day/yr sample was submitted
Water Well Disinfected? Yes <b>X</b> No

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued ..... Clamped .....
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below) Welded <b>X</b>
2 PVC	4 ABS	7 Fiberglass	Threaded .....
Blank casing diameter: <b>10 3/4</b> in. to <b>95.42</b> ft. Dia. .... in. to .... ft. Dia. .... in. to .... ft.			
Casing height above land surface: <b>12</b> in. weight <b>40.42</b> lbs./ft. Wall thickness or gauge No. <b>.365</b>			
TYPE OF SCREEN OR PERFORATION MATERIAL:	7 PVC	10 Asbestos-cement	
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
11 Other (specify) .....			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 <b>95.42</b> ft. to <b>123.04</b> ft. From .... ft. to .... ft.			
GRAVEL PACK INTERVALS: From <b>87.5</b> ft. to <b>124</b> ft. From .... ft. to .... ft.			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other <b>50% Road sand, 50% Bentonite</b>
Grout Intervals: From <b>0</b> ft. to <b>4</b> ft. From <b>4</b> ft. to <b>25</b> ft. From <b>25</b> ft. to <b>87.5</b> ft.				
What is the nearest source of possible contamination:	1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens
	2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage
	3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage
				13 Insecticide storage
				14 Abandoned water well
				15 Oil well/Gas well
				16 Other (specify below)
				None known

Direction from well?		LITHOLOGIC LOG	FROM		TO	PLUGGING INTERVALS
FROM	TO		FROM	TO		
0	3	Topsoil				
3	18	Sand and gravel, fine, medium, coarse				
18	60	Sand and gravel, fine, medium, clay streak at 40'				
60	95	Sand and gravel, fine, medium, few clay streaks at 60', 68' and 70'				
95	103	Sand and gravel, fine, some medium				
103	104	Clay, brown and white				
104	109	Sand and gravel, fine, medium, lots of brown clay				
109	122	Sand and gravel, fine, medium				
122	124	Shale, red				

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>12-11-97</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>185</b> . This Water Well Record was completed on (mo/day/yr) <b>12-18-97</b> under the business name of <b>Clarke Well &amp; Equipment, Inc.</b> by (Signature) <i>Clarke Well &amp; Equipment, Inc.</i>
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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.

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