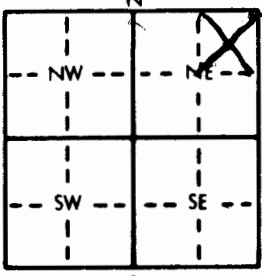


1 LOCATION OF WATER WELL: County: Barber 007 Fraction NE & NE 1/4 Section Number 6 Township Number T 32 S Range Number R 11 E/W

Distance and direction from nearest town or city street address of well if located within city? 3 1/2 miles East of Medicine Lodge, Kansas

2 WATER WELL OWNER: W C WISKE RR#, St. Address, Box #: RR# 2 City, State, ZIP Code: Medicine Lodge, Kansas Board of Agriculture, Division of Water Resources Application Number: _____

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  DEPTH OF COMPLETED WELL: 40 ft. ELEVATION: _____

Depth(s) Groundwater Encountered 1. 10 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 10 ft. below land surface measured on mo/day/yr 6-5-84
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 240 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter 12 in. to 40 ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes No _____

5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped _____
 PVC 4 ABS 7 Fiberglass _____ Welded _____
 Blank casing diameter 5 1/2 in. to 40 ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.
 Casing height above land surface 2 feet in., weight _____ lbs./ft. Wall thickness or gauge No. 4

TYPE OF SCREEN OR PERFORATION MATERIAL: 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 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 20 ft. to 40 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 10 ft. to 40 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From 10 ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination: Livestock pens 14 Abandoned water well
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) _____
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage _____
 Direction from well? _____ How many feet? 100 feet

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
1	10	Top Soil			
10	20	100' clay			
20	30	200' Soil fine			
30	40	30' coarse gravel			
40	42	Total Dept of Well 40 feet			
40	42	Red Shale Bottom			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) _____ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 226 This Water Well Record was completed on (mo/day/yr) 6-22-84 under the business name of Weber Well Service by (signature) Leon A Weber

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 32 R 11 E/W SEC. 6 NE 1/4 NE 1/4