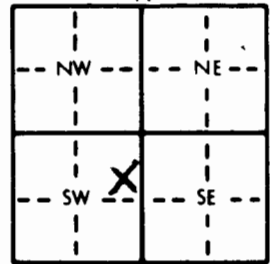


1 LOCATION OF WATER WELL: Fraction SE 1/4 NE 1/4 SW 1/4 Section Number 2 Township Number T 32 S Range Number R 31 E/W
 County: Seward
 Distance and direction from nearest town or city street address of well if located within city?

5 Miles West, 1 Mile North, 1/2 Mile East, 1/4 mile North of Plains

2 WATER WELL OWNER: Darrell Langhofer Murfine Drilling, Inc. Board of Agriculture, Division of Water Resources
 RR#, St. Address, Box #: Rt. 1 Box 661 Application Number: 940495
 City, State, ZIP Code: Plains, Ks. 67869 Colby, Ks. 67701

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL: 300 ft. ELEVATION: _____ ft.
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 219 ft. below land surface measured on mo/day/yr
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: 8 in. to 300 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 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 _____ No X

5 TYPE OF BLANK 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: 4.5 in. to 240 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
 Casing height above land surface: 18 in., weight 2.38 lbs./ft. Wall thickness or gauge No. .248
 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 _____ ft. to _____ ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From _____ ft. to _____ ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: 10 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? East How many feet? 150'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Surface	160	161.5	Med. Sand
2	16	Silty Sand	161.5	162.5	Cemented Sand
16	40	Sandy Clay w/Caliche	162.5	170	Sticky Sandy Clay
40	57	Med. Sand & Gravel w/Rocks	170	198	Med. Sand w/Clay Strks.
57	73	Sandy Clay w/Caliche Strks.	198	219	Sticky Clay w/Caliche Strks.
73	84	Med. Sand & Gravel	219	241	Med. Sand & Gravel
84	85.5	Cemented Sand	241	251	Sticky Clay w/Caliche
85.5	100	Med. Sand & Gravel w/a few Clay & Cemented St.	251	254	Cemented Sand
100	118	Med. Sand & Gravel	254	260	Med. Sand & Gravel
118	123	Clay w/Caliche	260	265	Sticky Clay
123	127	Sticky Clay	265	272	Med. Sand
127	130	Clay	272	280	Sticky Clay w/Sand Strks.
130	149	Med. Sand	280	300	Med. Sand
149	160	Sticky Clay w/a few CalicheSt	300		Blue Shale

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) 12-22-94 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/yr) 12-23-94 under the business name of Woofter Pump & Well, Inc. by (signature) Jay C. Woofter

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.