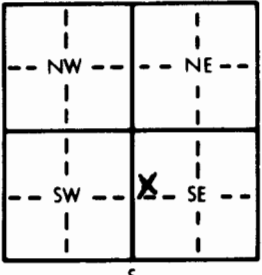


1 LOCATION OF WATER WELL: Fraction SW 1/4 NW 1/4 SE 1/4 Section Number 5 Township Number T 33 S Range Number R 19 E
 County: COMANCHE

Distance and direction from nearest town or city street address of well if located within city?
3 1/2 E OF PROTECTION, KS

2 WATER WELL OWNER: Aldebaron
 RR#, St. Address, Box #: Box 982 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Pratt, Kansas 67124 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

 4 DEPTH OF COMPLETED WELL: 50 ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. 30 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 10 ft. below land surface measured on mo/day/yr MAY 18 81
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 60 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter 10 in. to 50 ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Asbestos-Cement 9 Dewatering 12 Other (Specify below) _____
 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 2 PVC 3 RMP (SR) 4 ABS
 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) _____
 CASING JOINTS: Glued Clamped _____
 Welded _____ Threaded _____
 Blank casing diameter 5 in. to 30 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 12 in., weight _____ lbs./ft. Wall thickness or gauge No. 214

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) _____
 12 None used (open hole) _____

SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) _____
 11 None (open hole) _____

SCREEN-PERFORATED INTERVALS: From 30 ft. to 50 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 From 10 ft. to 50 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From 0 ft. to 10 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:
 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) NONE

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Top soil			
2	5	Sand, fine			
5	30	Clay, brown			
30	50	Sand, med to coarse and fine to med gravel			
50	90	Clay, brown and red			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) MAY 18 81 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 325 This Water Well Record was completed on (mo/day/yr) JULY 4 81 under the business name of Central Well & Pump Inc. Pratt, Kansas 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, 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 33 R 19 E 5 SW 1/4 NW 1/4 SE 1/4